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National Highway Traffic Safety Administration

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# **DYNAMIC SCIENCE, INC.** In-Depth Accident Investigation

Contract DTNH22-94-D-27058 Case DSI-95-AB-17

1996

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Vehicle 1, a 1994 Plymouth Grand Voyager, was being driven east on a two-lane, undivided roadway in the early morning hours of a summer weekend at a speed estimated as 111 km/h (69 MPH). In addition to the driver, there was one other adult and four children occupying this vehicle.				
Vehicle 2, a 1983 Buick LeSabre, was being driven west at a speed estimated to be 89 km/h (55 MPH). The driver was the only occupant of this vehicle.				
Vehicle 2 crossed the centerline and struck Vehicle 1 head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1. Vehicle 2 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.				
Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old male, sustained numerous serious injuries including a skull fracture, an atlanto-occipital dislocation, and heart contusions. He died as a result of his injuries. The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old female and a 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.				
The driver of Vehicle 2 was inju	The driver of Vehicle 2 was injured, but to what extent is not known at this time.			
Both vehicles were towed from sold to a wrecking yard.	Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out", partially dismantled, and sold to a wrecking yard.			
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## **TECHNICAL SUMMARY**

CONTRACTOR: CONTRACT NUMBER: Dynamic Science, Inc. DTNH22-94-D-27058

CASE NUMBER:

Case DSI-95-AB-17

Vehicle 1, a 1994 Plymouth Grand Voyager, was being driven east on a two-lane, undivided roadway in the early morning hours of a summer weekend at a speed estimated as 111 km/h (69 MPH). In addition to the driver, there was one other adult and four children occupying this vehicle.

Vehicle 2, a 1983 Buick LeSabre, was being driven west at a speed estimated to be 89 km/h (55 MPH). The driver was the only occupant of this vehicle.

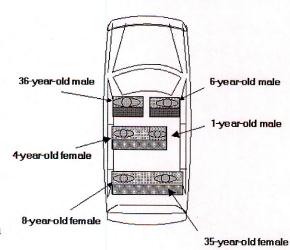
Vehicle 2 crossed the centerline and struck Vehicle 1 head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1. Vehicle 2 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.

Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old

male, sustained numerous serious injuries including a skull fracture, an atlanto-occipital dislocation, and heart contusions. He died as a result of his injuries. The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old female and a 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.

The driver of Vehicle 2 was injured, but to what extent is not known at this time.

Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out", partially dismantled, and sold to a wrecking yard.



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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points be coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

## DYNAMIC SCIENCE, INC. ACCIDENT INVESTIGATION CASE NUMBER: DSI-95-AB-17

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ACCIDENT DATA:	
Location:	·
Area/Type:	Rural
Date/Time:	Summer/morning
Accident Type:	Head-on
Injury Severity:	
Vehicle 1:	Driver: AIS-2 R/F Occupant: AIS-3 R/R Occupant: AIS-2 Third seat Occupant: Injured, unknown severity Third seat Occupant: Injured, unknown severity
Vehicle 2:	Driver: Reportedly sustained non-incapacitating injuries of unknown severity
AMBIENCE:	
Viewing Conditions:	Good
Cloud Cover:	Unknown
Precipitation:	None
Temperature:	11 ° C (52° F)
Pood Surface	Dray

#### **ROADWAY**:

VEHICLE 1 VEHICLE 2

Type: Two-lane, undivided Two-lane, undivided

Width: 7.5 M (24.5 ft.) 7.5 M (24.5 ft.)

Traffic Density: Light Light

Median: None None

Edge: Asphalt paved shoulder Asphalt paved shoulder

Surface: Bituminous Bituminous

Reported Defects: None None

**Co-efficient of Friction (est.):** 0.70 0.70

Vertical Alignment: Level Level

Horizontal Alignment: Straight Straight

#### **Traffic Controls:**

#### **VEHICLE 1**

## **VEHICLE 2**

Signals:

None

None

Signs:

None

None

**Speed Limit:** 

89 KPH (55 MPH)

89 KPH (55 MPH)

Markings:

Dashed yellow lines separate EB/WB travel lanes. Single, solid, white painted line separates east shoulder

and EB travel lane.

Dashed yellow lines separate EB/WB travel lanes. Single, solid, white painted line separates west shoulder and WB travel lane.

LR flat due to damage.

#### **VEHICLES:**

VEHICLE 1 VEHICLE 2

Description: 1994 Plymouth Voyager 1983 Buick LeSabre

**Odometer:** 15214 km (9456 miles) 88572 km (55048 miles)

**Engine:** 3.3 L MPI 5.0L V8 4BBL

Vehicle Modifications: None None

Tire Condition: New. LF/43 PSI, New, RR/27 PSI, RF, LF,

RF/flat due to damage,

RR/45 PSI, LR/43 PSI

Manual Restraints: Lap and shoulder Lap and shoulder

Automatic Restraints:NoneNoneReported Defects:NoneNone

Cargo: Unknown Unknown

Windshield Damage: Cracked and holed Cracked and dislodged

Fleet: NA NA

**Tow Status:** Towed due to damage Towed due to damage

4

#### **VEHICLE DAMAGE:**

VEHICLE 1 VEHICLE 2

Object Struck: Vehicle 2 Vehicle 1

Event Number: 01

CDC: 12FZEW7 12FDEW6

Maximum Crush: 137 cm (54 inches) 170 cm (27 inches)

#### **VEHICLE VELOCITY ESTIMATES:**

	VEHICLE 1	VEHICLE 2
Impact Speed: (estimated)	Unknown impact speed. Estimated travel speed 111.5 KPH (69.3 MPH)	Unknown
Total Delta Vehicle:	84.4 KPH (52.5 MPH)	90.5 KPH (56.2 MPH)
Longitudinal Delta Vehicle:	-84.1 KPH (-52.3 MPH)	-89.1 KPH (-55.4 MPH)
Lateral Delta Vehicle:	+7.4 KPH (4.6 MPH)	-15.7 KPH (-9.8 MPH)
<b>Energy Dissipation:</b>	757405.3 NT-M (558558.5 FT-LB)	360010.6 NT-M (265494.6 FT-LB)

The delta Vs were calculated using CRASH III with the following adjustments: the D values were interpreted from photos and exemplar vehicles, CRASH L represents undeformed end width, the crush profiles were obtained from the police report (they were compared photographically and appear to be reasonable), and the occupant weights were obtained as estimates from the NASS Coding and Editing Manual.

#### Vehicle 1 pre-crash skid

$$S_1 = \sqrt{30*d*f}$$
where  $S_1$  = skid speed,  $d$  =skid distance =97.7 ft.
$$f = drag \ factor = 0.7,$$

$$S_1 = \sqrt{30*97.7*.7} = 45.3 \ MPH = 72.8 \ KPH$$

Calculate travel speed using velocity change as the impact speed.

$$S_1 = \sqrt{S_s^2 + S_i^2}$$
where  $S_s$  = speed at start of skid,  $S_i$  = impact speed
$$S_1 = \sqrt{45.3^2 + 52.5^2} = 69.3 \text{ MPH} = 111.5 \text{ KPH}$$

#### **COLLISION SEQUENCE:**

Pre-Crash:

This two vehicle crash occurred during the morning hours of a summer weekend on a two-lane, undivided, asphalt paved, rural roadway in

The weather was clear and the roadway dry.

Vehicle 1, a rented 1994 Plymouth Grand Voyager, was being driven east by a 36-year old male at a speed estimated to be 111 km/h (69 MPH). In addition to the driver, there was one other adult and four children occupying this vehicle.

Vehicle 2, a 1983 Buick LeSabre, was being driven west at a speed estimated to be 89 kph (55 MPH). A post-crash inspection found that the cruise control on this vehicle was in the "ON" position. The driver was the only occupant of this vehicle. Police investigators indicated that driver fatigue was a contributing factor.

Crash:

Vehicle 2 crossed the centerline. The driver of Vehicle 1 apparently saw Vehicle 2 and began braking, leaving 29.5 M (97 ft) of locked skids, and steered to the right. Vehicle 2 entered the path of Vehicle 1 and impacted it head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1. Vehicle 2 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north 13.3 M (43.8 ft) from the area of impact. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.

Post Crash:

Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old male, sustained a skull fracture, brain injuries, atlanto-occipital dislocation, and chest trauma; he died as a result of his injuries.

Shortly after the collision, the right front occupant stopped breathing twice. He was removed from the vehicle and CPR was applied. By the time the police had arrived, he was breathing on his own. The following lists events related to his transport and treatment.

Event Time	<u>Event</u>	Event Time	<u>Event</u>
0710	Accident	0753	Arrived at hospital
0714	Police notified	0945	Departed hospital via Life
0723	Police arrived		Flight
0727	Ambulance arrived	Unknown	Arrived at hospital
0743	Ambulance departed	1646	Time of death

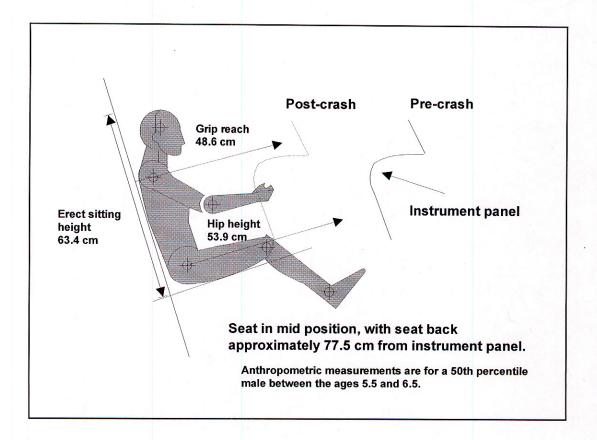
The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old male, sustained a skull fracture. The rearmost seat occupants, an eight year old female and 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.

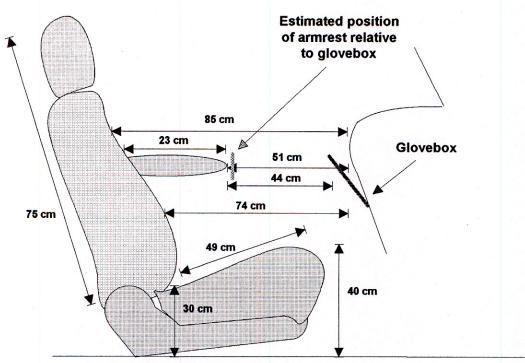
The driver of Vehicle 2 was injured, but to what extent is not known at this time.

## Occupant Kinematics:

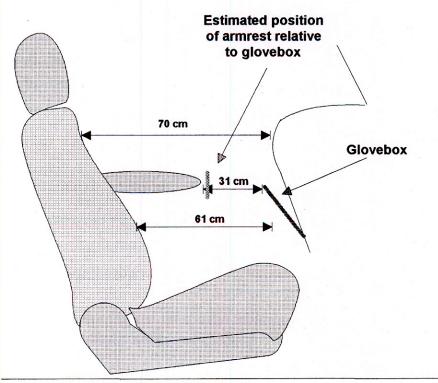
The 36-year-old male driver of Vehicle 1 was seated in a bucket seat in what would appear to be a normal, upright fashion. Prior to impact, the driver's right foot was presumably on the brake; both hands were on the steering wheel. The driver was wearing the available lap and shoulder belt. At impact, the driver would have been forced forward and slightly to the left. The airbag deployed upon impact and was loaded by the driver. There was some intrusion in this seat position and the driver was physically restricted.

The right front occupant, a six year old male, was seated in a bucket seat in an upright fashion. It appears, based on injury evidence and statements of practice, that this occupant was properly wearing the lap and shoulder belt. Prior to impact, this occupant would have loaded the restraint due to preimpact braking. There is clear indication that at impact, the airbag deployed and contacted this occupant's entire face. There are abrasions to the neck and abdomen which match up to lap and shoulder belt use. It appears that this occupant's left hand was extended and it struck the instrument panel, contusing the hand and fracturing the radius. This occupant sustained torn atlanto-occipital ligaments which the medical consultant attributes to excessive flexion of the neck. It appears likely that the head was turned as it was being forced rearward. There was considerable intrusion into this area and it appears that the glove compartment may have opened during the impact. This occupant's legs likely contacted these intruding components. The following diagram provides an overview of this occupant's dimensions relative to the preand post-crash dimensions of the case vehicle's interior.





Seat in rearwardmost position



Seat in forwardmost position

The second seat left occupant, a 4-year old female, was seated in a bench seat. She was wearing the lap and shoulder belt and the police indicated that she did not sustain any apparent injury.

The second seat right occupant, a 1-year-old male, was seated in an integral child safety seat. He sustained a skull fracture which appears to have come about as a result of contacting the rear of the RF seat.

The third seat positions were occupied by an 8-year-old female and a 35-year-old female. Both occupants were wearing their seatbelts. The 8-year-old complained of abdominal pain from the seatbelt and had some musculoskeletal injuries. The 35-year-old sustained an unknown injury to her left leg.

Airbag System:

Vehicle 1 was equipped with both a driver's airbag and passenger side airbag that deployed as a result of this head-on collision.

**Scene Clearance:** 

Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out" and sold to a wrecking yard.

**Safety Standards:** 

There were no violations of Federal Motor Vehicle Safety Standards and Regulations found during the inspection of the case vehicle.

**OCCUPANT 2** 

## **DRIVER AND OTHER OCCUPANTS:**

## **VEHICLE 1**

Age/Sex: 36/Male 6/Male **Seated Position:** Left front Right front **Seat Type:** Bucket Bucket Height: Unknown Unknown Weight: Unknown Unknown Occupation: Unknown None **Pre-existing Medical** Unknown None **Condition:** 

**DRIVER** 

Alcohol/Drug Involvement:NoneNoneDriving Experience:≈20 yearNA

Body Posture:Normal, uprightUnknownHand Position:Both hands on wheelUnknownFoot Position:Right foot on brake, left onUnknown

floorboard

Restraint Usage: Lap and shoulder used Lap and shoulder used

**Additional Occupants:** Five Four

<sup>&</sup>lt;sup>1</sup>Restraint used = "Yes", per police report

#### **DRIVER AND OTHER OCCUPANTS:**

## **VEHICLE 1**

**Additional Occupants:** 

Occupant #4 Occupant #3 Age/Sex: 4/Female 1/Male **Seated Position:** Left rear Right rear Bench with integral child Bench with integral child seat **Seat Type:** seat Unknown Unknown Height: Unknown Unknown Weight: Occupation: NA NA **Pre-existing Medical** Unknown Unknown **Condition: Alcohol/Drug Involvement:** None None NA **Driving Experience:** NA Unknown Unknown **Body Posture: Hand Position:** Unknown Unknown **Foot Position:** Unknown Unknown Restraint Usage:<sup>2</sup> Restraint used, type Child seat harnesses used unknown

Three

Two

<sup>&</sup>lt;sup>2</sup>Restraint used = "Yes", per police report

#### **DRIVER AND OTHER OCCUPANTS:**

## **VEHICLE 1**

**Foot Position:** 

Restraint Usage:<sup>3</sup>

**Additional Occupants:** 

Occupant #6 Occupant # 5 Age/Sex: 35/Female 8/Female **Seated Position:** Third seat Third seat **Seat Type:** Bench Bench Height: Unknown Unknown Weight: Unknown Unknown **Occupation:** NA Unknown **Pre-existing Medical** Unknown Unknown **Condition: Alcohol/Drug Involvement:** None None **Driving Experience:** NA NA **Body Posture:** Unknown Unknown **Hand Position:** Unknown Unknown

Unknown

One

Lap and shoulder used

Unknown

None

Lap and shoulder used

<sup>&</sup>lt;sup>3</sup>Restraint used = "Yes", per police report

## **DRIVER AND OTHER OCCUPANTS:**

## **VEHICLE 2**

**DRIVER** 

Age/Sex: 25/Male

**Seated Position:** Left front

Seat Type: Bench

Height: Unknown

Weight: Unknown

Occupation: Unknown

Pre-existing Medical Unknown

Condition:

**Alcohol Involvement:** Yes

**Driving Experience:** Unknown

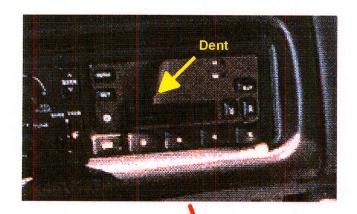
**Body Posture:** Unknown

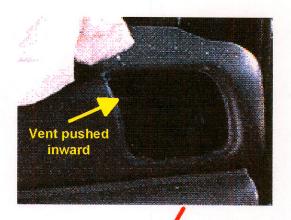
**Hand Position:** Unknown

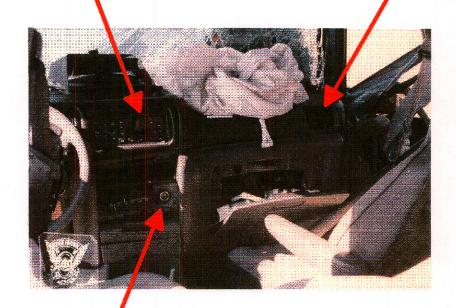
Foot Position: Unknown

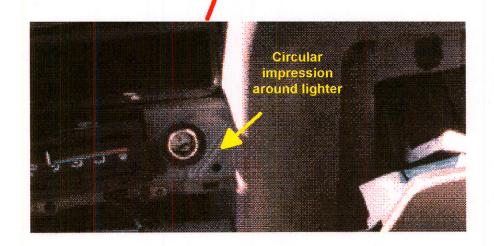
Restraint Usage: Lap and shoulder used

Additional Occupants: None









## **INJURIES:**

## Vehicle 1

	INJURY	OIC CODE	<u>ICD-9</u>	SOURCE / Confidence <sup>4</sup>
Driver:	Right femur fracture	8518022,1	821.0	Brake/2
	Right wrist fracture	7518002,1	814.0	Steering wheel rim/2
	Left wrist fracture	7518002,2	814.0	Steering wheel rim/2
R/F Occupant: <sup>5</sup>	Cerebral edema	140454.3,6	348.5	Airbag/2
	Atlanto-occipital dislocation/laceration	650208.2,6	847.0	Airbag/2
	Brain contusion	140402.3,6	851.4	Airbag/2
	Subarachnoid hemorrhage	140466.3,6	852.0	Airbag/2
	Skull fracture, frontal bone	150402.2,5	800.2	Airbag/2
	Skull fracture, sphenoid	150200.3,2	801.2	Airbag/2
	Contusions, heart	441004.3,4	861.01	Unknown/9
	Radius fracture, left	752802.2,2	813.00	Instrument panel/2
	Abrasion, eyelid	297202.1,1	910.0	Airbag/1
	Contusion, ear	290402.1,1	920.0	Unknown/9
	Abrasion, cheek, 3.5 in.	290202.1,1	910.0	Airbag/1
	Abrasion, right side of neck, 3.0 in.	390202.1,1	910.0	Shoulder belt/2
	Contusion, right arm	790402.1,1	923.03	Instrument panel/2
	Punctate abrasion, right arm	790202.1,1	913.0	Airbag/2
	Contusion, right thigh	890402.1,1	924.0	Unknown/9

<sup>&</sup>lt;sup>4</sup>1=Certain, 2=Probable, 3=Possible, 4=Unknown

<sup>&</sup>lt;sup>5</sup>The combination of high speed, impact location, and intrusion made survival for this occupant unlikely, even with proper restraint use and the airbag deployment.

Punctate abrasions, right thigh	890202.1,1	916.0	Unknown/9
Subungual hematoma, right toe	890402.1,1	924.3	Instrument panel/2
Abrasion, left knee	890202.1,2	916.0	Instrument panel/2
Contusions, left thigh	890402.1,2	924.0	Instrument panel/2
Punctate abrasions, left thigh	890202.1,2	916.0	Instrument panel/2
Linear abrasion, right abdomen	590202.1,1	911.0	Seatbelt/2
Curved abrasion, right abdomen	590202.1,1	911.0	Seatbelt/2
Abrasion, right abdomen	590202.1,1	911.0	Airbag/3
Punctate abrasions, right abdomen	590202.1,1	911.0	Airbag/3
Contusions, right abdomen	590402.1,1	922.2	Unknown/9
Abrasion, chin	290202.1,8	910.0	Airbag/1
Abrasion, left check	290202.1,2	910.0	Airbag/1
Abrasion, nose	290202.1,4	910.0	Airbag/1
Contusion, left side	290402.1,2	920.0	Airbag/3
Contusions, forehead	290402.1,7	920.0	Airbag/2
Abrasion, forehead	290202.1,7	910.0	Airbag/1
Contusion, lower back	590402.1,8	922.3	Seat back/3
Linear abrasions, posterior left thigh	890202.1,2	916.0	Seat/3
Vertical linear abrasions, posterior right thigh	890202.1,1	916.0	Seat/3
Ecchymoses to left hand	790402.1,2	923.2	Instrument panel/2
Skull fracture	1500002,9	800.6	Seat back/9

Right rear, second seat

DSI-95-AB-17

Third seat (35 YO)	Left lower leg injury	8950997,2	916.8	Unknown/9	
Third seat (8 YO)	Musculoskeletal injuries	9550997,9	Unknown	Unknown/9	

**INJURIES:** 

Vehicle 2

<u>INJURY</u> <u>OIC CODE</u> <u>ICD-9</u> <u>SOURCE</u>

**Driver:** Unknown

#### Abbreviations Used In Scene And Photographic Documentation

ft Feet in Inches

AIS Abbreviated Injury Scale

BLF Begin Left Front
BLR Begin Left Rear
BRF Begin Right Front
BRR Begin Right Rear
CBE Cab Behind Engine
CCW Counterclockwise

CDC Collision Deformation Classification

CG Center of Gravity

CM Centimeter

COE Cab Over Engine

CW Clockwise

East, Eastbound E, EB **ELF End Left Front ELR** End Left Rear **End Right Front ERF End Right Rear ERR Final Rest Position FRP** I Interstate Highway **Intermediate Point** IP

KG Kilogram

KPH Kilometers Per Hour

LF Left Front
LR Left Rear
M Meter

N, NB North, Northbound

NE Northeast NW Northwest

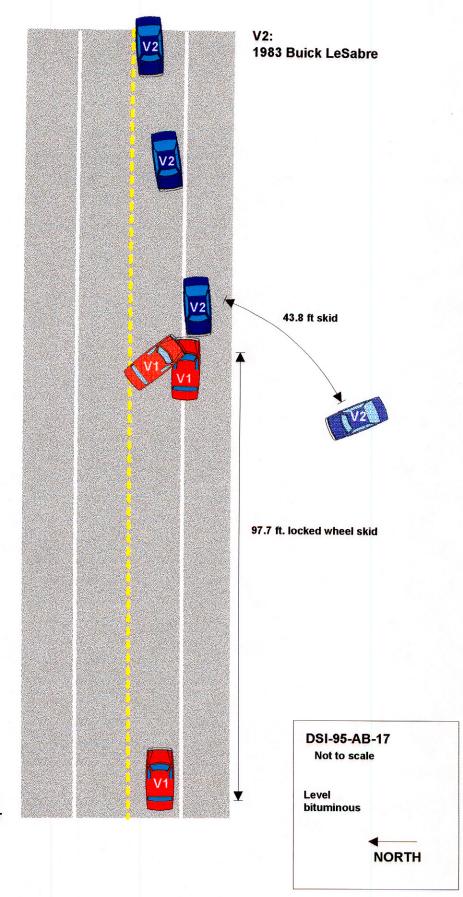
PDOF Principal Direction of Force

POI Point of Impact
RF Right Front
RL Reference Line
RP Reference Point
RR Right Rear

S, SB South, Southbound

T Time or Elapsed Time (in seconds)

U.S. United States Highway
V1 Vehicle Number 1
W, WB West, Westbound

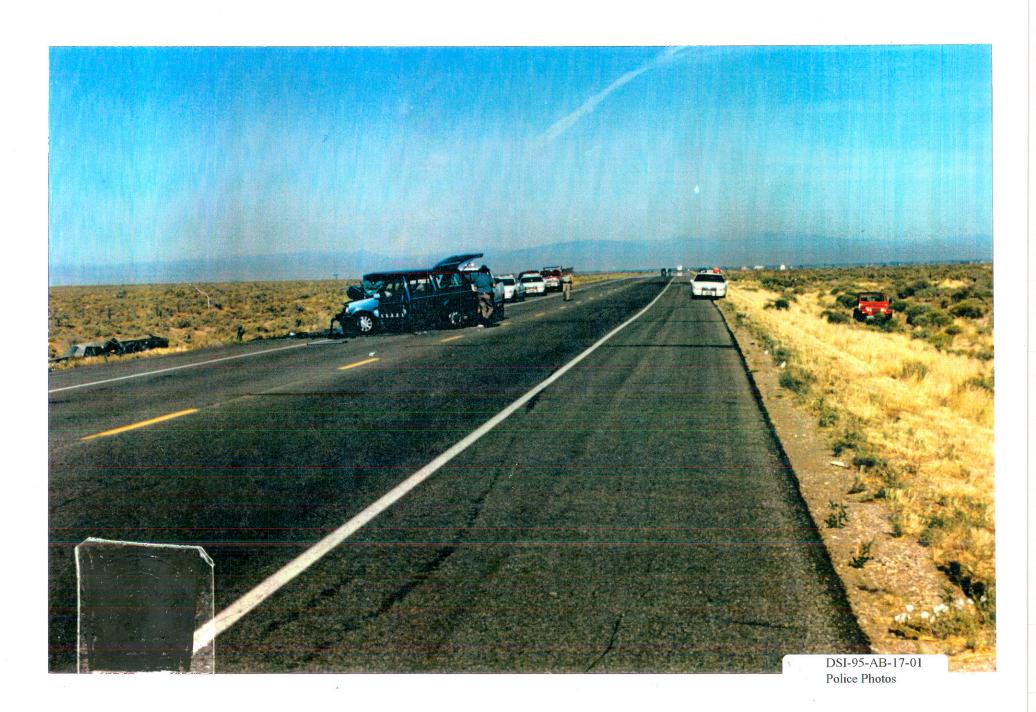


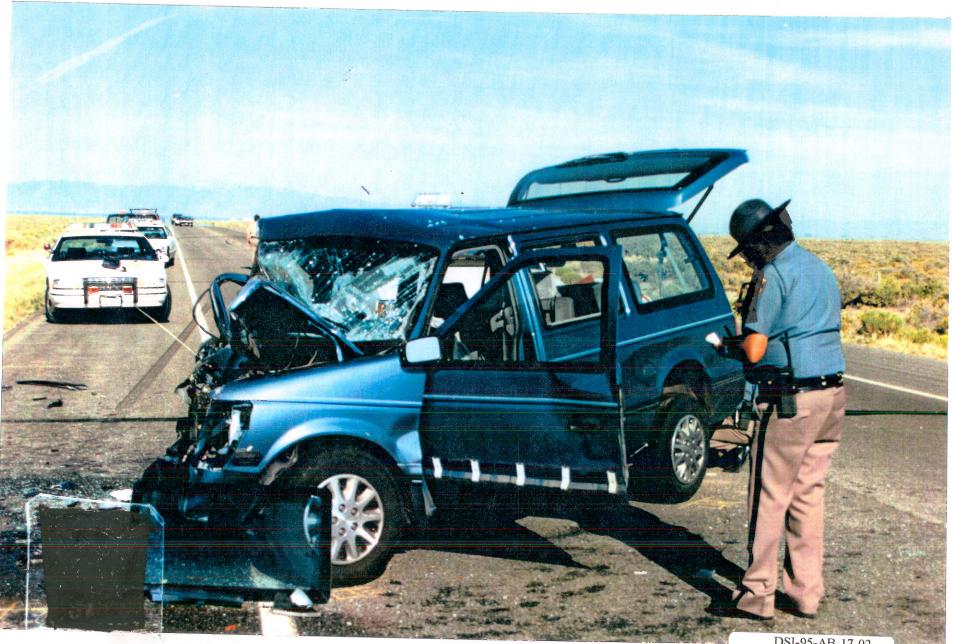
V1: 1994 Plymouth Grand Voyager

## SELECTED POLICE PHOTOS

## Case No. DSI-95-AB-17

PHOTO NO.	VEHICL E NO.	DIRECTION OF PICTURE	SUBJECT MATTER
1	1	West	Final rest area. Note: the top of Vehicle 2 is visible on the left side of the photo.
2	1	West	Final rest area (closeup).
3	11	West	Impact area, shows locked wheel skids.
4	2	South	Final rest.
5-11	11	CW	Exterior.
12-19	1	NA	Interior. Note: #12 shows RF intrusion, #13 shows forward seat deformation for 2nd and 3rd seats, #14 shows convertible child seat.
20-29	2	CCW	Exterior.
30-31	2	NA	Interior.
		·	
		-	
			·





DSI-95-AB-17-02 Police Photos





DSI-95-AB-17-04 Police Photos



DSI-95-AB-17-05 Police Photos



DSI-95-AB-17-06 Police Photos



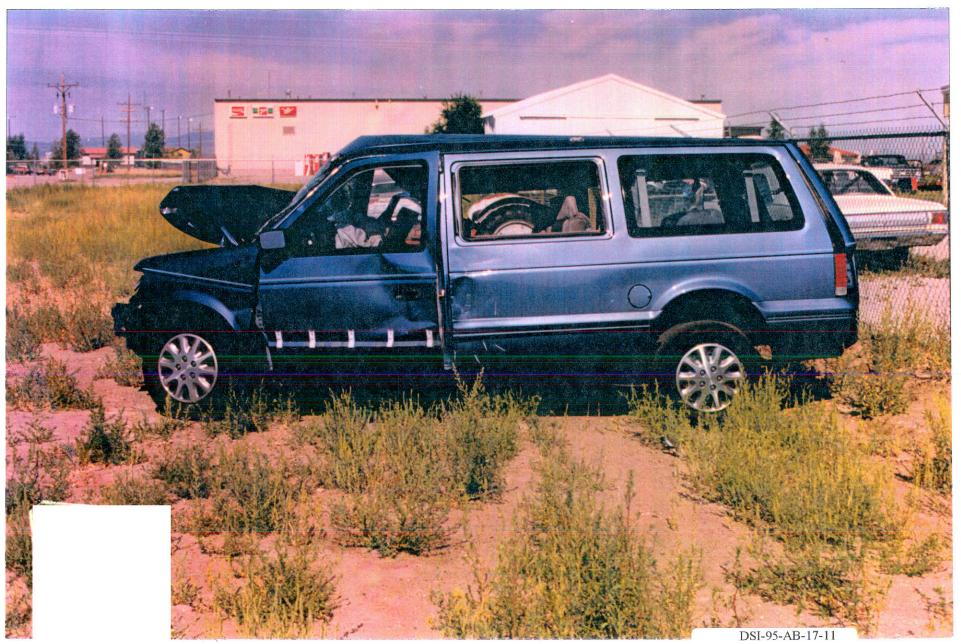
Police Photos



DSI-95-AB-17-08 Police Photos









DSI-95-AB-17-12 Police Photos









DSI-95-AB-17-16 Police Photos





DSI-95-AB-17-18 Police Photos

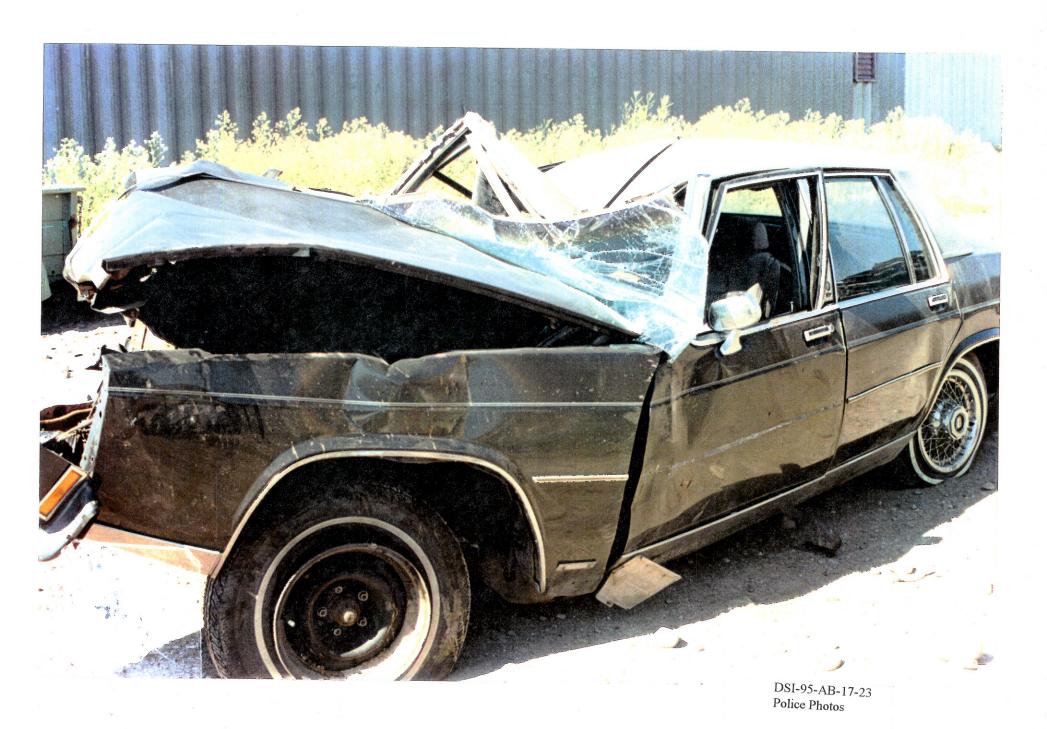




DSI-95-AB-17-20 Police Photos









DSI-95-AB-17-24 Police Photos





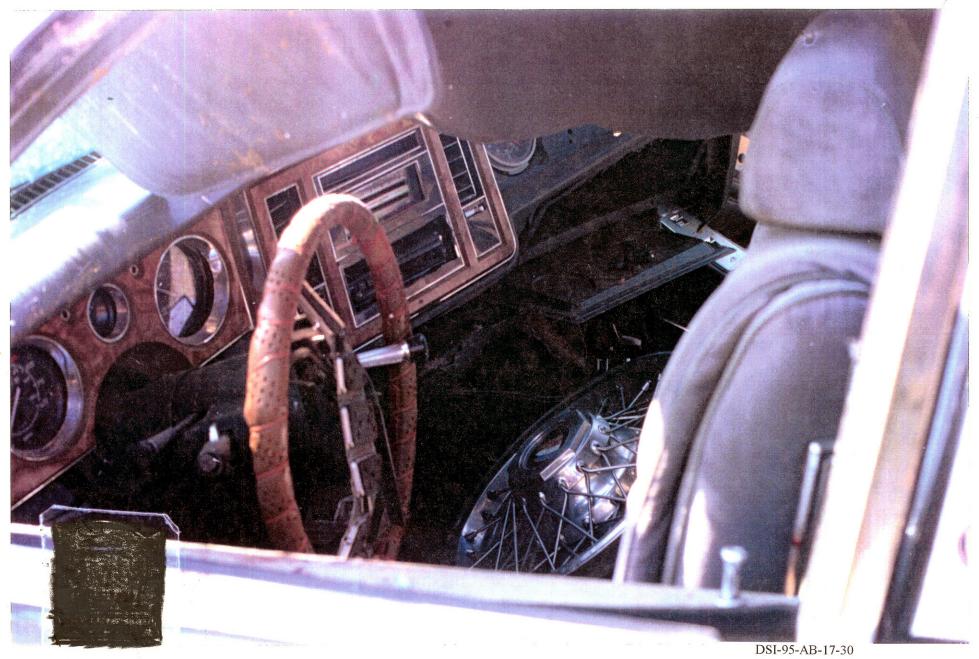
DSI-95-AB-17-26 Police Photos



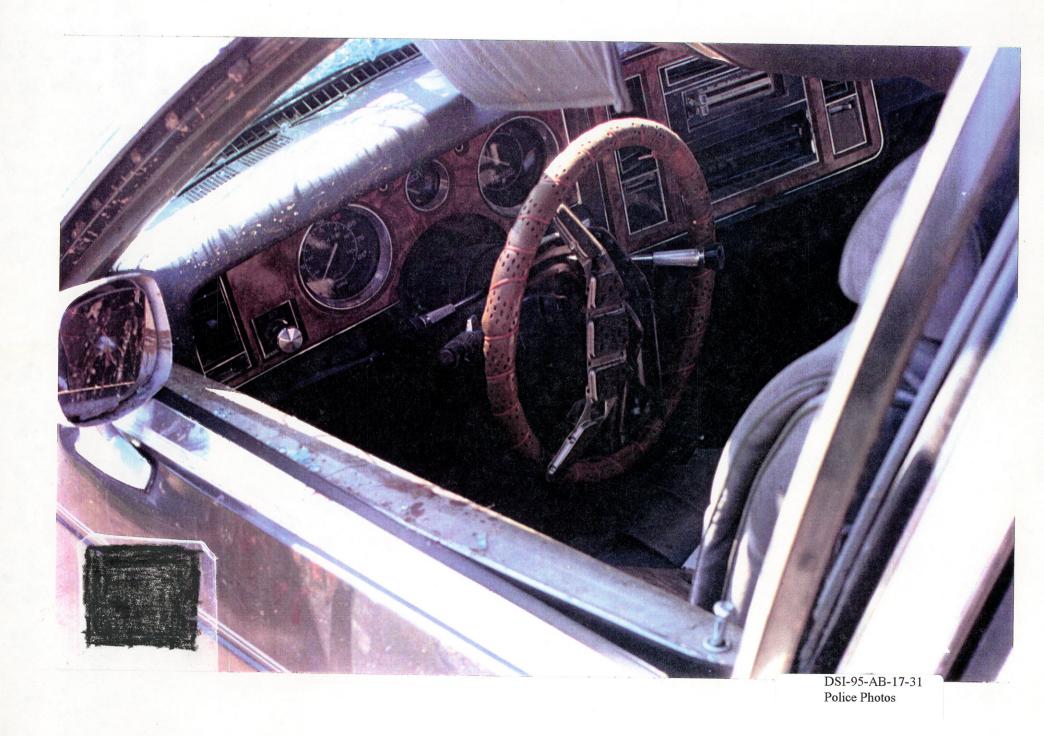
DSI-95-AB-17-27 Police Photos







DSI-95-AB-17-30 Police Photos



## **SELECTED INSURANCE PHOTOS**

## Case No. DSI-95-AB-17

PHOTO NO.	VEHICLE NO.	DIRECTION OF PICTURE	SUBJECT MATTER
1	1	NA	Interior shot showing RF seating area.
2	11	NA	Exterior.
3-4	1	NA	Interior view showing LR seat for second seat.
5	1	NA	Interior view showing RR seat for second seat.
6	1	NA	Interior view showing third seat.
7	2	NA	Exterior.
			•
		,	
			•



DSI-95-AB-17-01







DSI-95-AB-17-07 Insurance Photos



DSI-95-AB-17-06 Insurance Photos



DSI-95-AB-17-05 Insurance Photos



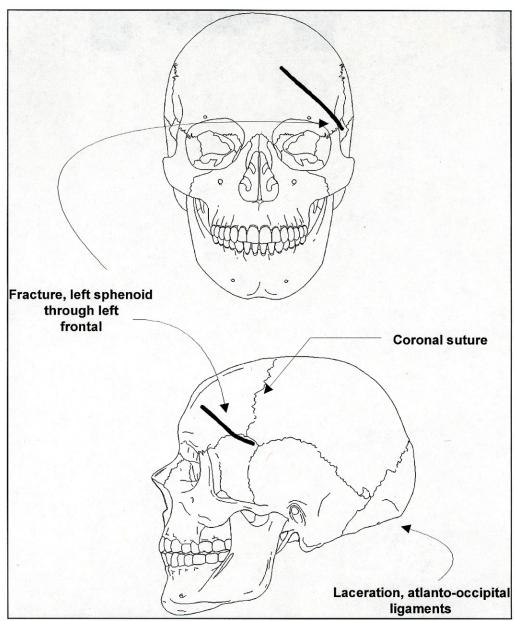


Figure 4. Front right occupant, Vehicle 1.

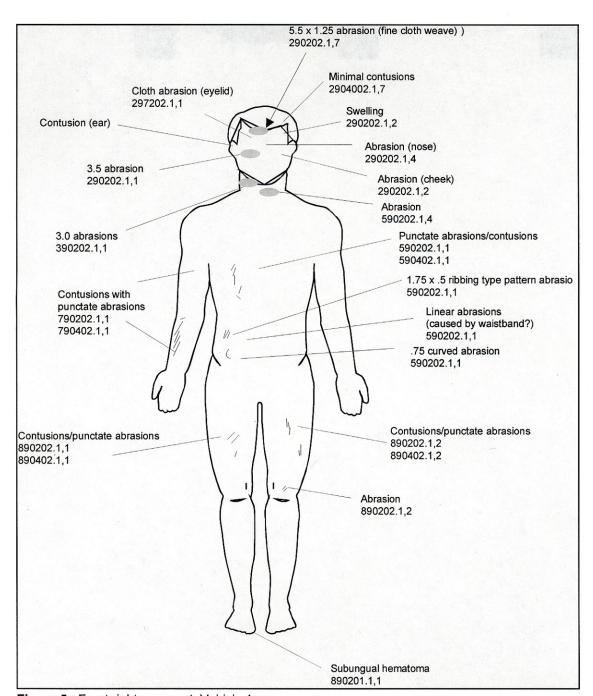


Figure 5. Front right occupant, Vehicle 1.

National Highway Tramic Safety Administration	ACCIDE	NT FORM	NATI	ONAL ACCIDENT S. CRASHWORTHINE	AMPLING SYSTE
Primary Sampling Unit Number		SPECIA	L STUDIE	S - INDICAT	ORS
2. Case Number - Stratum	A B 17	has been com	ipleted; code	dy (SS15-SS18 1 for the chec studies not chec	cked special
IDENTIFICATION		0.0000000000000000000000000000000000000	n the opeoid	oludios not che	ored.
Number of General Vehicle     Forms Submitted	<u> </u>	6 SS	15 Administra	ative Use	<u> </u>
4. Date of Accident (Month,Day,Year)	/ 9 8	(Dat	16 Pedestria a for this special separate file.)	n Crash Data St study available	tudy <u>0</u>
5. Time of Accident	p 7 1 4	8 SS <sup>-</sup>	17 Impact Fi	res	
Code reported military time of a	ccident.	9 SS1	18 Unsafe Di	river Actions	<u> </u>
NOTE: Midnight = 2400 Unknown = 9999		10 SS1	19		<del></del> .
		N	UMBER O	F EVENTS	
		11. Number o in This Ac		vents	<u> </u>
		Code the in this acc		ents which occu	rred
	ACCIDEN'	T EVENTS			
For each event that occurred in the accidence or object in the right columnns.	lent, code the lowest	numbered vehicle i	n the left colu	mns and the othe	er involved
Accident Event	(	Seneral Vehic	le Number		General
Sequence Vehicle Number Number		Area of Damage Object	or Contacted	Class Of Vehicle	Area of Damage
12. <u>0 1</u> 13. <u>\$\phi\$ 1</u>	14. <u>2 <b>Ф</b></u> 18	5. <u>F</u> 16	<i>4</i> 2	17. <b>Ø</b> 5	18. <u>F</u>
19. <b>0 2</b> 20	21 22	2 23		24	25
26. <b>0 3</b> 27	28 29	9 30		31	32
33. <u>0 4</u> 34	35 36	3 37		38	39

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

40. <u>0 5</u> 41. \_\_\_\_ 42. \_\_\_ 43. \_\_\_ 44. \_\_\_ 45. \_\_\_ 46.\_\_\_

	CODES FO	OR CLASS OF VEHICLE	
(00) Not a motor	vehicle	(31) Large pickup truck (≤ 4,500 kgs GVWR	`
( ,	/mini (wheelbase < 254 cm)		•
• •	neelbase ≥ 254 but < 265 cm)	· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	(39) Unknown pickup truck type (≤ 4,500 kgs	SGVWR
	(wheelbase ≥ 265 but < 278 cm)	(45) Other light truck (≤ 4,500 kgs GVWR)	
	eelbase ≥ 278 but < 291 cm)	(48) Unknown light truck type (≤ 4,500 kgs G	iVWR)
	elbase ≥ 291 cm)	(49) Unknown light vehicle type	
	ssenger car size	(50) School bus (excludes van based)(> 4,50	0 kgs GVWR)
(14) Compact utili	•	(58) Other bus (> 4,500 kgs GVWR)	
(15) Large utility v	ehicle (∡ 4,500 kgs GVWR)	(59) Unknown bus type	
(16) Utility station	wagon (∡ 4,500 kgs GVWR)	(60) Truck (> 4,500 kgs GVWR)	
(19) Unknown uti	lity type	(67) Tractor without trailer	
(20) Minivan (≤ 4,	500 kgs GVWR)	(68) Tractor-trailer(s)	
	4,500 kgs GVWR)	(78) Unknown medium/heavy truck type	
	chool bus (≤ 4,500 kgs GVWR)	(79) Unknown light/medium/heavy truck type	
	pe (∡ 4,500 kgs GVWR)	(80) Motored cycle	
• •	n type (≤ 4,500 kgs GVWR)	(90) Other vehicle	
	kup truck (≤ 4,500 kgs GVWR)	` ,	
(30) Compact pic	Rup truck (£ 4,300 kgs GVVVR)	(99) Unknown	
	CODES FOR GENI	RAL AREA OF DAMAGE (GAD)	
CDS APPLICABL	E (0) Not a motor vehicle	R) Right side (T) Top	
AND OTHER	(N) Noncollision		ercarriage
VEHICLES	(F) Front	(B) Back (9) Unkr	
		(5) 5.11.1	
TDC	(0) Not a motor vehicle	L) Left side (C) Rear of c	ab
APPLICABLE	(N) Noncollision	(B) Back of unit with cargo area (V) Front of (	cargo area
VEHICLES	(F) Front	(rear of trailer or straight truck) (T) Top	Ū
	(R) Right side	_ , , , ,	ercarriage
	( , ,	(9) Unkr	
		(0) 0/1110	
	<b>CODES FOR VEHICLE</b>	NUMBER OR OBJECT CONTACTED	
(01-30) — Vehicle	Number	(57) Fence	
		(58) Wall	
Noncollision		(59) Building	
(31) Overturn	- rollover (excludes end-over-end)	(60) Ditch or culvert	
(32) Rollover	end-over-end	(61) Ground	
(33) Fire or ex	<b>cplosion</b>	(62) Fire hydrant	
(34) Jackknife		(63) Curb	
(35) Other int	raunit damage (specify):	(64) Bridge	
		(68) Other fixed object (specify):	
(36) Noncollis	ion injury		
(38) Other no	ncollision (specify):	(69) Unknown fixed object	
(00)			•
(39) Noncollis	ion — details unknown	Collision with Nonfixed Object	
0-10-1	101.	(70) Passenger car, light truck, van, or othe	r vehicle not
Collision With Fixe		in-transport	
	0 cm in diameter)	(71) Medium/heavy truck or bus not in-trans	port
	0 cm in diameter)	(72) Pedestrian	
(43) Shrubbe		(73) Cyclist or cycle	
(44) Embankı		(74) Other nonmotorist or conveyance	
(45) Breakaw	ay pole or post (any diameter)		
Manhard B		(75) Vehicle occupant	
Nonbreakaway Po		(76) Animal	
	ost (≤ 10 cm in diameter)	(77) Train	
	ost (> 10 cm but ≤ 30 cm in diameter)	(78) Trailer, disconnected in transport	
	ost (> 30 cm in diameter)	(79) Object fell from vehicle in-transport	
(53) Pole or p	ost (diameter unknown)	(88) Other nonfixed object (specify):	
(54) Concrete			
(UT) CUILLE	traffic harrier	(90) Unknown nonfixed abject	•
(55) Impact at	traffic barrier	(89) Unknown nonfixed object	
(55) Impact at	tenuator	•	<del></del>
(56) Other train	tenuator ffic barrier (includes guardrail)	(89) Unknown nonfixed object (98) Other event (specify):	
(56) Other train	tenuator	•	

Administration	GENERAL VE	HICLE FORM NATIONAL ACCIDENT SAMPLING CRASHWORTHINESS DATA	G SYSTE A SYSTE
Primary Sampling Unit Number     Case Number - Stratum	AB 1 7	12. Speed Limit (000) No statutory limit Code posted or statutory speed limit	9
3. Vehicle Number	4 /	in kmph (999) Unknown	
VEHICLE IDENTIF	ICATION	<u>55</u> mph X 1.6093 = <u>489</u> kmph	
4. Vehicle Model Year  Code the last two digits of the r  (99) Unknown	nodel year	13. Police Reported Alcohol Presence For Driver (0) No alcohol present (1) Yes alcohol present (7) Not reported	<u></u>
5. Vehicle Make (specify):  PLYMOUTH	9	(8) No driver present (9) Unknown	
Applicable codes are found in y NASS Data Collection, Coding Editing Manual. (99) Unknown  6. Vehicle Model (specify):	and 4 4 2.	14. Alcohol Test Result For Driver Code actual value (decimal implied before first digit—0.xx) (95) Test refused (96) None given (97) AC test performed, results unknown (98) No driver present (99) Unknown  Source:	6
<ol> <li>Body Type         Note: Applicable codes may be the back of this page.     </li> </ol>	found on	15. Police Reported Other Drug Presence For Driver (0) No other drug(s) present	<u> </u>
8. Vehicle Identification Number    P 4 G H 4 F 1 R	11 12 13 14 15 16 17	<ul> <li>(1) Yes other drug(s) present</li> <li>(7) Not reported</li> <li>(8) No driver present</li> <li>(9) Unknown</li> <li>16. Other Drug Specimen Test Result For Driver</li> <li>(0) No specimen test given</li> </ul>	<u>\$</u>
Unknown—Code all nines  9. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police	_ <b></b>	<ul> <li>(1) Drug(s) not found in specimen</li> <li>(2) Drug(s) found in specimen, (specify):</li> <li>(3) Specimen test given, results unknown o obtained</li> <li>(8) No driver present</li> <li>(9) Unknown if specimen test given</li> </ul>	r not
(6) Ambulance (7) Fire truck or car (8) Other (specify): (9) Unknown		17. Driver's Zip Code  (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99998) No driver present	
OFFICIAL REC	ORDS	(99999) Unknown	
<ul><li>10. Police Reported Vehicle Dispos</li><li>(0) Not towed due to vehicle da</li><li>(1) Towed due to vehicle dama</li><li>(9) Unknown</li></ul>	mage	<ul> <li>18. Driver's Race/Ethnic Origin</li> <li>(1) White (non-Hispanic)</li> <li>(2) Black (non-Hispanic)</li> <li>(3) White (Hispanic)</li> <li>(4) Black (Hispanic)</li> </ul>	9
11. Police Reported Travel Speed Code to the nearest kmph (NOT less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown		<ul> <li>(5) American İndian, Eskimo or Aleut</li> <li>(6) Asian or Pacific Islander</li> <li>(7) Other (specify):</li> <li>(8) No driver present</li> </ul>	
<b>6</b>	meh	(9) Unknown	

## **CODES FOR BODY TYPE**

### **CDS APPLICABLE VEHICLES**

### **Automobiles**

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify):
- (09) Unknown automobile type

### Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

### Utility Vehicles (≤ 4,500 kgs GVWR)

- (14) Compact utility (Jeep CJ-2 CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

### Van Based Light Trucks (≤ 4,500 kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van (≤ 4,500 kgs GVWR)
- (23) Van based motorhome (≤ 4,500 kgs GVWR)
- (24) Van based school bus (≤ 4,500 kgs GVWR)
- (25) Van based other bus (≤ 4,500 kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify):
- (29) Unknown van type

# Light Conventional Trucks (Pickup style cab, ≤ 4,500 kgs GVWR)

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)

- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

### Other Light Trucks (≤ 4,500 kgs GVWR)

- (40) Čab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

### OTHER VEHICLES

### Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify):
- (59) Unknown bus type

### Medium/Heavy Trucks (> 4,500 kgs GVWR)

- (60) Step van (> 4,500 kgs GVWR)
- (61) Single unit straight truck (4,500 kgs < GVWR ≤ 8,850 kgs)
- (62) Single unit straight truck (8,850 kgs < GVWR ≤ 12,000 kgs)
- (63) Single unit straight truck (> 12,000 kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

# Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify):\_\_\_\_
- (89) Unknown motored cycle type

### Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type

	PRECRASH ENVIRONMENTAL DATA	75	D = d Od= - a O = distan	1
40	A	<b>2</b> 5.	. Roadway Surface Condition (1) Dry	
19.	Relation To Interchange Or Junction		(1) Diy (2) Wet	
	(0) Non-interchange area and non-junction (1) Interchange area related		(3) Snow or slush	
	(1) Interchange area related		(4) Ice	
	Non-Interchange junctions		(5) Sand, dirt, or oil	
	(2) Intersection related		(8) Other (specify):	
	(3) Driveway, alley access related		(9) Unknown	
	(4) Other junction (specify)	1		_
		26.	Light Conditions	<u> </u>
	(5) Unknown type of junction		(1) Daylight	
	(O) Unknown	ł	(2) Dark	
	(9) Unknown		(3) Dark, but lighted	
	!		(4) Dawn	*
20.	Trafficway Flow		(5) Dusk (9) Unknown	
	(0) Not physically divided (two way traffic)		(9) Unknown	
	(1) Divided trafficway-median strip without positive			
	barrier	l <sub>27.</sub>	Atmospheric Conditions	Φ
	(2) Divided trafficway-median strip with positive barrier		(0) No adverse atmospheric-related driving	
	(3) One way traffic		conditions	
	(9) Unknown		(1) Rain	
	<b>!</b>		(2) Sleet/hail	
21.	Number Of Travel Lanes 2		(3) Snow	
	(1) One		(4) Fog	
	(2) Two	l	(5) Rain and fog	
	(3) Three	l	(6) Sleet and fog	المدياء
	(4) Four	l	(7) Other (e.g., smog, smoke, blowing sand or etc.) (specify):	
	(5) Five	l	etc.) (specify): (9) Unknown	
	(6) Six (7) Seven or more		(5) 5.11.1.1.1.1.	
	(9) Unknown	28.	Traffic Control Device	Φ
	(o) Omaion.	l	(0) No traffic control(s)	<del></del> -
22	Dondrigge Allimon and	l	(1) Traffic control signal (not RR crossing)	
	Roadway Alignment / / / / / / / / / / / / / / / / / / /	l	Dd-fam.	
	(2) Curve right	l	Regulatory (2) Stop sign	
	(3) Curve left	l	(2) Stop sign (3) Yield sign	
	(9) Unknown	l	(4) School zone sign	
	( )	l	(5) Other regulatory sign (specify):	
22	Roadway Profile			
	(1) Level		(6) Warning sign (not RR crossing)	
	(2) Uphill grade (>2%)		(7) Unknown sign	
	(3) Hill crest		(8) Miscellaneous/other controls including RR	
	(4) Downhill grade (>2%)		controls (specify):	
	(5) Sag		(9) Unknown	
	(9) Unknown		(9) Olikilowii	
24.	Roadway Surface Type 2	29.	Traffic Control Device Functioning	ф
	(1) Concrete		(0) No traffic control device	<del></del>
	(2) Bituminous (asphalt)		(1) Traffic control device not functioning	
	(3) Brick or block		(specify)	
	(4) Slag, gravel, or stone	:		
	(5) Dirt		(2) Traffic control device functioning properly	
	(8) Other (specify):(9) Unknown		(9) Unknown	
	(a) Ouknown			
	•			

	PF	RECRASH DRIVER RELATED DATA	This Making Town
	•		This Vehicle Traveling (10) Over the lane line on left side of travel lane
30.	Driv	rer's Distraction/Inattention To Driving <u>\$\phi\$\$ 1</u>	(11) Over the lane line on right side of travel lane
	(Pric	or To Recognition Of Critical Event)	(12) Off the edge of the road on the left side
	(00)	No driver present	(13) Off the edge of the road on the right side
	(01)	Attentive or not distracted  Looked but did not see	(14) End departure
	(02)	Distractions	(15) Turning left at intersection
	(03)	By other occupant(s), (specify):	(16) Turning right at intersection
			(17) Crossing over (passing through) intersection
	(04)	By moving object in vehicle (specify):	(18) This vehicle decelerating (19) Unknown travel direction
			(19) Offknown travel direction
	(05)	While talking or listening to cellular phone (specify	Other Motor Vehicle In Lane
		location and type of phone):	(50) Other vehicle stopped
	(06)	While dialing cellular phone (specify location and	(51) Traveling in same direction with lower steady
	(00)	type of phone):	speed
		type of phono).	(52) Traveling in same direction while decelerating
	(07)	While adjusting climate controls	(53) Traveling in same direction with higher speed
		While adjusting radio, cassette, CD (specify):	(54) Traveling in opposite direction
			(55) In crossover (56) Backing
	(09)	While using other device/object in vehicle (specify):	(59) Unknown travel direction of other motor vehicle in
	(40)	Classy or fall colors	lane
		Sleepy or fell asleep Distracted by outside person, object, or event	
	('')	(specify):	Other Motor Vehicle Encroaching Into Lane
		(openy).	(60) From adjacent lane (same direction)—over left
	(12)	Eating or drinking	lane line
	(13)	Smoking related	(61) From adjacent lane (same direction)—over right
	(97)	Distracted/inattentive, details unknown	lane line (62) From apposite direction, ever left lane line
	(98)	Other, distraction (specify):	(62) From opposite direction—over left lane line (63) From opposite direction—over right lane line
	(00)	Unknown	(64) From parking lane
		<b>.</b>	(65) From crossing street, turning into same direction
31.	Pre-	Event Movement (Prior to	(66) From crossing street, across path
	Rec	ognition of Critical Event)	(67) From crossing street, turning into opposite
	(00)	No driver present Going straight	direction
	(02)	Decelerating in traffic lane	(68) From crossing street, intended path not known
	(03)	Accelerating in traffic lane	(70) From driveway, turning into same direction (71) From driveway, across path
	(04)	Starting in traffic lane	(72) From driveway, turning into opposite direction
	(05)	Stopped in traffic lane	(73) From driveway, intended path not known
	(06)	Passing or overtaking another vehicle	(74) From entrance to limited access highway
	(07)	Disabled or parked in travel lane	(78) Encroachment by other vehicle—details unknown
	(08)	Leaving a parking position	
	(10)	Entering a parking position	Pedestrian, Pedalcyclist, or Other Nonmotorist
	(11)	Turning right Turning left	(80) Pedestrian in roadway
	(12)	Making a U-turn	(81) Pedestrian approaching roadway (82) Pedestrian—unknown location
	(13)	Backing up (other than for parking position)	(83) Pedalcyclist or other nonmotorist in roadway
	(14)	Negotiating a curve	(specify):
	(15)	Changing lanes	(84) Pedalcyclist or other nonmotorist approaching
	(16)	Merging	roadway, (specify):
	(17)	Successful avoidance maneuver to a previous critical event	(85) Pedalcyclist or other nonmotorist—unknown
	(97)	Other (specify):	location (specify):
	(37)	Other (specify).	Object or Animal
	(99)	Unknown	Object or Animal (87)  Animal in roadway
	` ,		(88) Animal approaching roadway
32.		cal Precrash Event <u>5</u> <b>4</b>	(89) Animal—unknown location
		Vehicle Loss of Control Due To:	(90) Object in roadway
		Blow out or flat tire	(91) Object approaching roadway
	(02)	Stalled engine	(92) Object—unknown location
	(03)	Disabling vehicle failure (e.g., wheel fell off) (specify):	(98) Other critical precrash event (specify):
	(04)	Non-disabling vehicle problem (e.g., hood flew up)	(00) Halania
		(specify):	(99) Unknown
	(05)	Poor road conditions (puddle, pot hole, ice, etc.)	
		(specify):	
	(06)	Traveling too fast for conditions	
	(U8)	Other cause of control loss (specify):	
	(Ua)	Unknown cause of control loss	
	(55)	Children Gadge Of COLICO 1085	

33. Attempted Avoidance Maneuver (00) No driver present (01) No avoidance maneuver (02) Braking (no lockup) (03) Braking (lockup) (04) Braking (lockup unknown) (05) Releasing brakes (06) Steering left (07) Steering right (08) Braking and steering left (09) Braking and steering right (10) Accelerating (11) Accelerating and steering left (12) Accelerating and steering right (98) Other action (specify):	35. Pre-Impact Location (0) No driver present (1) Stayed in original travel lane (2) Stayed on roadway but left original travel lane (3) Stayed on roadway, not known if left original travel lane (4) Departed roadway (5) Remained off roadway (6) Returned to roadway (7) Entered roadway (9) Unknown  36. Accident Type (Note: Applicable codes on back of this page) (00) No impact Code the number of the diagram that best
No driver present     Tracking     Skidding longitudinally—rotation less than 30 degrees     Skidding laterally—clockwise rotation     Skidding laterally—counterclockwise rotation     Other vehicle loss-of-control (specify):      Precrash stability unknown	describes the accident circumstance (98) Other accident type (specify): (99) Unknown

STOP HERE IF GV07 DOES NOT EQUAL 01 - 49

	OCCUPANT RELATED	44. Vehicle Cargo Weight 9, 9 9 0
37.	Driver Presence in Vehicle	Code weight to nearest 10 kilograms.
	(0) Driver not present (1) Driver present	(000) Less than 5 kilograms
	(9) Unknown	(999) Unknown
38.	Number of Occupants This Vehicle $\phi$	lbs X .4536 =, kgs
•	(00-96) Code actual number of occupants	Source:
	for this vehicle (97) 97 or more	ROLLOVER DATA
	(99) Unknown	45. Rollover $\phi$ $\phi$
39.	Number of Occupant Forms Submitted	(00) No rollover (no overturning)
	AIR BAG RELATED	Rollover (primarily about the longitudinal axis) (01-16) Code the number of quarter turns
40	Is this an AOPS Vehicle?	(17) Rollover, 17 or more quarter turns (specify):
<del>7</del> ∪.	(0) No (includes unknown)	(98) Rolloverend-over-end (i.e., primarily about
	Yes - researcher determined     VIN determined air bag system	the lateral axis)
	<ul> <li>(2) VIN determined air bag system</li> <li>(3) VIN determined automatic (passive) belts</li> <li>(4) VIN determined air bag and automatic (passive)</li> </ul>	(99) Rollover (overturn), details unknown
	(4) VIN determined air bag and automatic (passive) belts	46. Rollover Initiation Type   (00) No rollover
11	Air Bag(s) Deployment, First Seat Frontal	(01) Trip-over
41.	Air Bag(s) Deployment, First Seat Frontal (0) Not equipped or not available (1) No air bags deployed	(02) Flip-over (03) Turn-over
	_ , ,	(04) Climb-over
	Single Air Bag Vehicle (2) Driver air bag deployed	(05) Fall-over (06) Bounce-over
	<ul><li>(2) Driver air bag deployed</li><li>(3) Driver air bag, unknown if deployed</li></ul>	(07) Collision with another vehicle
	Multiple Air Bag Vehicle	(08) Other rollover initiation type specify):
	(4) Driver side only deployed (5) Passenger side only deployed	(98) Rollover-end-over-end
	(6) Driver and passenger side deployed	(99) Unknown rollover initiation type
	deployed	47. Location of Rollover Initiation  (0) No rollover
	(8) Air bag(s) deployed, details unknown (9) Unknown	(1) On roadway
4.5	/	(0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (8) Rollover—end-over-end (9) Unknown
42.	Air Bag(s) Deployment, Other Than First  Seat	(4) On roadside or divided trafficway median
	Frontal	(8) Rolloverend-over-end (9) Unknown
	(0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact)	48. Rollover Initiation Object Contacted $\phi$ $\phi$
	(2) Deployed inadvertently just prior to accident (3) Deployed, details unknown	(Note: Applicable codes on back of page)
	(4) Deployed as a result of a noncollision event	49. Location on Vehicle Where Initial Principal 4
	during accident sequence (e.g., fire, explosion, electrical)	Tripping Force Is Applied
	(5) Unknown if deployed	(0) No rollover (1) Wheels/tires
	(7) Nondeployed (9) Unknown	(2) Side plane
		(2) Side plane (3) End plane (4) Undercarriage
	Specify type of "other" air bag present:	(5) Other location on vehicle (specify):
		(6) Non-contact rollover forces (specify):
	VEHIOLE WEIGHT 1	(8) Rolloverend-over-end
	VEHICLE WEIGHT ITEMS	(9) Unknown
40	Vehicle Curb Weight / 6 2 n	50. Direction of Initial Roll
43	Code weight to nearest	(0) No rollover
	10 kilograms. (045) Less than 450 kilograms	(2) Roll left - primarily about the longitudinal axis
	(610) 6,100 kilograms or more	(8) Rolloverend-over-end (9) Unknown roll direction
	(999) Unknown	(5) Chanomi foli direction
	Source:	

# **CODES FOR ROLLOVER INITIATION OBJECT CONTACTED**

(00) No rollover (01-30) — Vehicle Number	(57) Fence (58) Wall
Noncollision	(59) Building (60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(32) No rollover impact initiation (end-over-end) (34) Jackknife	(62) Fire hydrant
(04) Dacknine	(63) Curb (64) Bridge
Collision With Fixed Object	(68) Other fixed object (specify):
(41) Tree (≼ 10 cm in diameter) (42) Tree (> 10 cm in diameter)	(60) Unknown fixed shiret
(43) Shrubbery or bush	(69) Unknown fixed object
(44) Embankment	Collision with Nonfixed Object
(45) Breakaway pole or post (any diameter)	(70) Passenger car, light truck, van, or other vehicle not in-transport
Nonbreakaway Pole or Post	(71) Medium/heavy truck or bus not in-transport (76) Animal
(50) Pole or post (≤ 10 cm in diameter)	(77) Train
(50) Pole or post (≤ 10 cm in diameter) (51) Pole or post (> 10 cm but ≤ 30 cm in diameter)	(78) Trailer, disconnected in transport
(52) Pole or post (> 30 cm in diameter) (53) Pole or post (diameter unknown)	(79) Object fell from vehicle in-transport (88) Other nonfixed object (specify):
(55) Total of post (diameter differently)	(00) Other nomixed object (specify).
(54) Concrete traffic barrier (55) Impact attenuator	(89) Unknown nonfixed object
(56) Other traffic barrier (includes guardrail) (specify):	(98) Other event (specify):
	(99) Unknown event or object

OVERRIDE/UNDERRIDE (THIS VEHICLE)	ACCIDENT RECONSTRUCTION PROGRAMS
51. Front Override/Underride (this Vehicle)	HIGHEST DELTA V
52. Rear Override/Underride (this Vehicle)  (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride	58. Basis for Total (Resultant) Delta V
Override (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify):  Underride (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):	Delta V Calculated  (01) Reconstruction program -damage only routine  (02) Reconstruction program -damage and trajectory routine  (03) Missing vehicle algorithm  Delta V Not Calculated  (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.
<ul> <li>(7) Medium/heavy truck or bus override (of any configuration)</li> <li>(9) Unknown</li> <li>HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V</li> </ul>	All vehicles within scope (CDC applicable) of reconstruction program but one of the collision conditions is beyond the scope of the reconstruction program or other acceptable reconstruction technique, regardless of adequacy of damage data.
Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown	(05) Rollover (06) Other non-horizontal forces (07) Sideswipe type damage (08) Severe override
	(09) Yielding object (10) Overlapping damage
54. Heading Angle For Other Vehicle 495	(11) All vehicle and collision conditions are within
S5.Towed Trailing Unit  (0) No towed unit (1) Yes—towed trailing unit (9) Unknown  56. Documentation of Trajectory Data for This Vehicle	scope of one of the acceptable reconstruction programs, but there is insufficient data available,  (98) Other, (specify):
(0) No (1) Yes	
<ul> <li>57. Post Collision Condition of Tree or Pole (For Highest Delta V)</li> <li>(0) Not collision (for highest delta V) with tree or pole</li> <li>(1) Not damaged</li> <li>(2) Cracked/sheared</li> <li>(3) Tilted &lt;45 degrees</li> <li>(4) Tilted ≥45 degrees</li> <li>(5) Uprooted tree</li> <li>(6) Separated pole from base</li> <li>(7) Pole replaced</li> <li>(8) Other (specify):</li> </ul>	
(9) Unknown	

COMPUTER GENERA	ED ORAGII GEVERITI
59. Total Delta V	Highest 63. Impact Speed 9 9 8
Nearest kmph (highest)Nearest kmph (secondary)  (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown	Nearest kmph (highest)  Nearest kmph (secondary)  (NOTE: 000 means less than 0.5 kmph)
Highest  60. Longitudinal Component of  Delta V  - β4.   Nearest kmph (highest)	(160) 159.5 kmph and above (998) Trajectory algorithm not run (999) Unknown  DELTA V CONFIDENCE LEVEL
Nearest kmph (secondary)  (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (999) Unknown  Highest  61. Lateral Component of Delta V	64. Confidence In Reconstruction Program Results (For Highest Delta V) (0) No reconstruction (1) Collision fits model — results appear reasonable (2) Collision fits model — results appear high (3) Collision fits model — results appear low (4) Borderline reconstruction — results appear reasonable
+ 7.4 Nagrack lemmb (high and)	OTHER SPEED ESTIMATE
Nearest kmph (highest)	OTHER SPEED ESTIMATE
Nearest kmph (nignest)  Nearest kmph (secondary)  (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph)  (±160) ±159.5 kmph and above (_999) Unknown	Highest  65. Barrier Equivalent Speed
Nearest kmph (nignest)  Nearest kmph (secondary)  (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph)  (±160) ±159.5 kmph and above	Highest 65. Barrier Equivalent Speed 4 9 7

IS MISSING VEHICLE ALGORITHM APPLICABLE FOR THIS VEHICLE? [] YES [] NO IF YES: IS A COMPLETED PROGRAM SUMMARY INCLUDED? [] YES [] NO

ESTIMATED DELTA V	VEHICLE INSPECTION	
66. Estimated Highest Delta V (Researcher Determined) (0) Reconstruction Delta V coded  Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph (5) ≥ 55 kmph  Other estimates of damage severity (6) Minor (7) Moderate (8) Severe (9) Unknown	# 67. Type of Vehicle Inspection  (0) No inspection  (1) Vehicle fully repaired-no damage evident  (2) Partial inspection (specify):  Photos only  (3) Complete inspection	-

\*\*\* IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67=0), \*\*\*

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS

\*\*\* IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE \*\*\*

THE EXTERIOR VEHICLE, INTERIOR VEHICLE,

OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.

U.S. Department of Transportation

National Highway Traffic Safety Administration

# EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Prima	ry Sampling Unit Nւ	umber		:	3. Vehic	le Numb	er	•		_4	<u>/</u>
2. Case i	Number - Stratum	<u>A</u> :	B /	7							
			VEHICLE	IDENT	IFICA	TION					
VIN	P 4 G H	1 4 4	R /	R X					Model \	Year	94
Vehicle Ma	ike (specify):	PLY MOUT	2+	,	Vehicle I	Model (sp	pecify): _	GRANC			
			l	OCAT	OR						
Locate the undamage	e end of the damaged axle for side impa	e with respect acts.	to the vehic	cle longitu	udinal ce	enter line	or bum	per corn	er for en	d impac	ts or an
Specific Impa	ict No. Locatio	on of Direct Dama	ıge		Location	on of Field	L		Location of	of Max Cru	ush
	OF BUME	ER CORNER	,			BUMPE			26		
	Kr Oving	EK COKIEL	-		KF	BUPITE			- 0		
		CRU	SH PROF	ILEIN	CENT	IMETE	RS				
NOTES: I	dentify the plane at etc.) and label adjus	which the C-n	neasureme	nts are ta	ken (e.g	., at bur	nper, abo	ve bum	per, at si	il, above	sill,
		(= :0:)	mee epiles,	•							
N	Measure C1 to C6 fr	rom driver to r	nassenger s	side in fron	nt or rea	r impacts	e and res	er to fron	t in side '	imnacte	•
	ree space value is									-	
ir	ndividual C locations etc. Record the valu	ıs. This may ir	nclude the fo	ollowing:	bumper	lead, bu	mper tar	oer, side	protrusio	aken at on, side	tne taper,
	Jse as many lines/c					-UNDEFOLI	MED GID	HTQIW	FROM	_	
Specific		Direct D	Damage		e de la car	Tage pro	offile.	$\leftarrow$	POLIC	<u>e.</u> L	<del>                                     </del>
Impact Number	Plane of Impact C-Measurements	\A/idth	Max Crush	Field L	C,	C <sub>2</sub>	C <sub>3</sub>	C <sub>4</sub>	C <sub>5</sub>	C <sub>6</sub>	±D
	(65)	<del> </del>	Ī								
	BUMPEL	≈ 46	54.6	62.2	9.0	18.4	34. Ø	42.6	52.4	54.B	+8.1
		+	1	+	<del> </del>	<del>                                     </del>	<del> </del>	<del>                                     </del>	<u> </u>	<del> </del>	
	(METRIC)			<b>-</b>			<u> </u>	<del>                                     </del>		<del> </del>	<del> </del>
/	BUMPER	116.8	137.1	157.9	22.9	45.1	86.4	106.7	133.0	137.1	+20.5
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National Accident Sampling System	n-Crashworthiness Data System: Exterior	Vehicle Form BEST AVAILABLE Page 2j
	VEHICLE DAMAGE SKETCH	. age 2j
TIRE—WHEEL DAMAGE  3. Rotation physically b. Tire restricted deflated  RF 1	ORIGINAL SPECIFICATIONS	WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only)  RF ⊕ 3 ∅ ∘ LF ±
,	MEASUREMENTS IN CENTIMETERS	11
	Original Bumper height	
	Bumper corner  Stringline  POST-CRASH  POST-CRASH	Bumper cornerStringline
1 marceush	Stringline	Bumper corner Stringline

NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

			CDCV	MODICCHE					
			CDCV	VORKSHE	21				
	CODES FOR OBJECT CONTACTED								
(01-30)	Vehicle	Number		(57)	Fence				
ν-	• • • • • • • •			(58)					
Noncoll	Noncollision				Building				
	(31) Overturn — rollover (excludes end-over-end)					a			
	(32) Rollover—end-over-end				Ditch or	cuivert			
				(61)					
		losion		(62)		rant			
(34)	Jackknife			(63)					
(35)	Other intra	unit damage (speci	ify):	(64)	Bridge				
				(68)	Other fix	ed object (sp	ecify):		
(36)	Noncollisio								
(38)	Other none	collision (specify):		(69)	Unknow	n fixed object	1		
(39)	Noncollisio	on — details unknov	wn	Collisio	on with Nor	fixed Object			
				(70)	Passeng	er car, light t	ruck, van, or	other vehicle	
Collisio	n With Fixed	l Object		` ′	not in-tra	insport	,,		
		cm in diameter)		(71)		heavy truck	or bus not in-	transport	
		cm in diameter)			Pedestri	an		папорот	
	Shrubbery				Cyclist o				
(44)	Embankm			(74)	Other no	nmotorist or	conveyance		
(,	Linbanian	<b>-</b>		(17)	Other no	illiotorist of	conveyance		
(45)	Breakaway	pole or post (any o	diameter)	(75)	Vehicle o	occupant		<del></del>	
(40)	Di Cakawa)	pole of post (ally t	alairietei j			occupant			
Nonbro	akowov Bol	o or Boot		(76)					
	akaway Pole		_43	(77)					
(50)	Pole or pos	st (≤ 10 cm in diam	eter)	(78)	Trailer, disconnected in transport				
(51)	Pole or pos	st (> 10 cm but ≤ 30	cm in diamete						
		st (> 30 cm in diam		(88)	Other nonfixed object (specify):				
(53)	Pole or pos	st (diameter unknov	vn)	(00)		I lade and the state of the sta			
<i>(EA</i> )	0			(89)	Unknow	n nonfixed ob	ject		
		raffic barrier			(98) Other event (specify):				
(55)	Impact atte			(98)					
(56)		c barrier (includes (	guardraii)						
	(specify):_			(99)	Unknow	n event or ob	ject		
		DEFORM	ATION CLASS	IFICATION BY	EVENT NI	JMBFR			
					(4)	(5)			
Accident		(1) (2)			Specific	Specific	(6)		
Event		Direction	Incremental	(3) L	ongitudinal_	Vertical or	Type of	(7)	
Sequence			Value of	Deformation	or Lateral	Lateral	Damage	Deformation	
Number	Contacte	ed (degrees)	Shift	Location	Location	Location	Distribution	Extent	
<b>b</b> 1	4 -	-5	44	F	老		W		
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			ilwortilliless Dai				Page 4
		COLLISION	N DEFORMA	TION CLAS	SIFICATIO	N	
HIGHEST	DELTA "V"						
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u><b>Ф</b></u>	5. <b>Ø Z</b>	62	7. <u> </u>	8. <u>Z</u>	9. <u>E</u>	10. <u>w</u>	11. <u>4</u> 7
Second Hi	ighest Delta "V"						
12	_ 13	_ 14	_ 15	16	17	18	19
		CRUS	SH PROFILE	IN CENTIM	ETERS		
	The crush p	profile for the da	amage described	in the CDC(s) a	above should be	e documented	
	in the app	ropriate space	below. (ALL ME	ASUREMENTS	ARE IN CENT	IMETERS.)	
HIGHEST	DELTA "V"						
20. I	.21. C	^	^	_	_		22.
					C <sub>5</sub>	<u>C<sub>6</sub> </u>	±D
158	<u> </u>	946	<u> 486 .</u>	<u>/                                    </u>	32 /	<u>37</u> -	921
Second Hi	ighest Delta "V"						
23.	24.	_	_				<b>25</b> .
<u> </u>					C <sub>5</sub>	C <sub>6</sub>	±D
						<b>.</b>	
					·	<del>-</del> -	
20 Hade							
(Coded impact (250)	250 centimeters	severity impact.) arest centimeter		(650)	Il Wheelbase Code to the nea centimeter 650 centimeters Unknown	s or more	3 4 3
		Tity end plane	npacı			<del></del>	_ centimeters
(For hig (	Damage Width ghest severity im Code to theneare	rest centimeter	117	(185)	I Average Track Code to the near centimter 185 centimeters	arest	155
	250 centimeters Unknown	s or more	1		Unknown	2.54 =	_ centimeters

			FUEL SYSTEM
30.	Are CDCs Documented but Not Coded on The Automated File?	φ	35. Location of Fuel Tank-1 Filler Cap  36. Location of Fuel Tank-2 Filler Cap  (0) No fuel tank
	(0) No (1) Yes	_	(1) On back plane (2) Aft of center of the rear wheels (rear axle) on left side plane
31.	Researcher's Assessment of Vehicle Disposition (0) Not towed due to vehicle damage (1) Towed due to vehicle damage (9) Unknown		<ul> <li>(3) Aft of center of the rear wheels (rear axle) on right side plane</li> <li>(4) Forward of center of the rear wheels (rear axle) on left side plane</li> <li>(5) Forward of center of the rear wheels (rear axle) on right side plane</li> </ul>
32.	Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle?  (0) No post manufacturer modifications (1) Yes - post manufacturer modifications (specify):	4	(6) Over the center of the rear wheels (rear axle) on left side plane (7) Over the center of the rear wheels (rear axle) on right side plane (8) Other (specify):
	(Include photograph of CERTIFICATION PLACARD in case report)  (9) Unknown if vehicle is modified	<del>-</del> 	37. Type of Fuel Tank-1  38. Type of Fuel Tank-2  (0) No fuel tank (electrical vehicle)  (1) Metallic  (2) Non-metallic  (9) Unknown
	FIRE OCCURRENCE		39. Location of Fuel Tank-1
	Fire Occurrence (0) No fire  Yes, fire occurred	<u> </u>	40. Location of Fuel Tank-2 (0) No fuel tank (1) Aft of center of the rear wheels (rear axle) centered (2) Aft of center of the rear wheels (rear axle) left
	(1) Minor (2) Major (9) Unknown		side (3) Aft of center of the rear wheels (rear axle) right side (4) Forward of center of the rear wheels (rear axle) centered
	Origin of Fire  (0) No fire  (1) Vehicle exterior (front, side, back, top)  (2) Exhaust system  (3) Fuel tank (and other fuel retention system parts)  (4) Engine compartment  (5) Cargo/trunk compartment  (6) Instrument panel  (7) Passenger compartment area  (8) Other location (specify):  (9) Unknown	4	(5) Forward of center of the rear wheels (rear axle) left side (6) Forward of center of the rear wheels (rear axle) right side (7) Over center of the rear wheels (rear axle) (8) Other (specify): (9) Unknown  41. Damage to Fuel Tank-1  42. Damage to Fuel Tank-2 (0) No fuel tank (1) No damage to fuel tank (2) Deformed, no seam failure (3) Deformed, with a seam failure (4) Punctured (5) Lacerated (ripped) (6) Abraded (scraped) (7) Filler neck separation from the fuel tank (8) Other damage (specify): (9) Unknown

<b>43</b> .	Leakage Location of Fuel System-1	9	47. Is This Vehicle Equipped With More Than
44.	Leakage Location of Fuel System-2 (0) No fuel tank	4	Two Fuel Tanks? (0) No (one or two tanks only)
			Van Man Than Tour Taula
	(1) No fuel leakage		Yes - More Than Two Tanks
	Primary Area Of Leakage		(1) Yes - no damage to any tank or filler
			cap and <u>no fuel system leakage</u>
			(2) Yes - no damage to any tank or filler
	• •		cap but there is fuel system leakage
	(4) Cap		(specify leakage location):
	<ul><li>(5) Lines/pump/filter</li><li>(6) Vent/emission recovery</li></ul>		/2) Voc. domesto en additional toule ou
	(0) OH(16)		(3) Yes damage to an additional tank or
	(9) Unknown		filler cap and there is fuel system leakage
	(9) Olikilowii		(specify the following):
			Type of tank
45	Fuel Type-1	41	Tank location
43.	ruei i ype-i		Filler cap location
46	Fuel Type-2	44	Tank damage
40.	ruer Type-2		Location of leakage
	Single Fuel Type		Type of fuel
	(00) No fuel tank		(9) Unknown if more than two tanks
	(01) Gasoline		
	(02) Diesel		
	(03) CNG (Compressed Natural Gas)		COMMENTS
	(04) LPG (Liquid Petroleum Gas) also		COMMENTS
	known as Propane		
	(05) LNG (Liquid Natural Gas)		
	(06) Methanol (M100 or M85)		
	(07) Ethanol (E100 or E85)		
	(08) Other (Hydrogen or others) (specify):		
	Electric Powered or Electric/Solar		
	Powered Vehicles		
	(10) Lead Acid Battery		
	(11) Nickel-Iron Battery		
	(12) Nickel-Cadmium Battery		
	(13) Sodium Metal Chloride Battery		
	(14) Sodium Sulfur Battery		
	(18) Other (Specify):		
	(98) Other Hybrid (specify):		
	(99) Unknown fuel type		
	(99) Officiown fuel type		
	*** STOP: IE THE ODS A		.E VEHICLE WAS NOT TOWED ***
	STOLL THE ODS A		L VEHICLE VVAS NOT TOVVED

(GV10=0)

DO NOT COMPLETE THE INTERIOR VEHICLE FORM.

National Highway Traffic Safety Administration	INTERIOR V
Primary Sampling Unit Number	
2. Case Number - Stratum _	AB 17
3. Vehicle Number	41
INTEGRITY	
Passenger Compartment Integrity     (00) No integrity loss	98
Yes, Integrity Was Lost Through  (01) Windshield  (02) Door (side)  (03) Door/hatch (back door)  (04) Roof  (05) Roof glass  (06) Side window  (07) Rear window (backlight)  (08) Roof and roof glass  (09) Windshield and door (side)  (10) Windshield and roof  (11) Side and rear window (side window and and side window  (12) Windshield and side window  (13) Door and side window  (14) Other combination of above (specify):  (15) Unknown	
Door, Tailgate or Hatch Opening  5. LF 1 6. RF 3 7. LR 6 8. RF	R_ <b>9</b> _9.TG/H_ <b>9</b> _
<ul> <li>(0) No door/gate/hatch</li> <li>(1) Door/gate/hatch remained closed and (2) Door/gate/hatch came open during coll</li> <li>(3) Door/gate/hatch jammed shut</li> <li>(8) Other (specify):</li> </ul>	
(9) Unknown	······
Damage/Failure Associated with Doc Opening in Collision. If IV05-IV09 ≠ 2, 10. LF <u>4</u> 11. RF <u>4</u> 12. LR <u>4</u> 13. F	Then code Ø
(0) No door/gate/hatch or door not opened	
Door, Tailgate or Hatch Came Open During (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side retc.) failure due to damage (6) Latch/striker and hinge failure due to de	ail,

# **GLAZING**

Type of Window/Windshield Glazing 15. WS 9 16. LF 9 17. RF 9 18. LR 9 19. RR 9 20. BL 9 21. Roof \$\Phi\$ 22. Other 9

- (0) No glazing
- (1) AS-1 Laminated
- (2) AS-2 Tempered
- (3) AS-3 Tempered-tinted (original)
- (4) AS-2 Tempered-with after market tint
- (5) AS-3 Tempered-tinted (with additional after market tint)
- (6) AS-14 Glass/Plastic
- (7) Glazing removed prior to accident
- (8) Other (specify):
- (9) Unknown

## Window Precrash Glazing Status

23. WS 1 24. LF 2 25. RF 9 26. LR 9 27. RR 9

28. BL / 29. Roof \$\oldsymbol{\psi}\$ 30. Other \$\oldsymbol{9}\$

- (0) No glazing
- (1) Fixed
- (2) Closed
- (3) Partially opened
- (4) Fully opened
- (7) Glazing removed prior to accident
- (9) Unknown

# Glazing Damage from Impact Forces

31. WS 2 32. LF / 33. RF 6 34. LR 9 35. RR 6

36. BL / 37. Roof **#** 38. Other **9** 

- (0) No glazing
- (1) No glazing damage from impact forces
- (2) Glazing in place and cracked from impact forces
- (3) Glazing in place and holed from impact forces
- (4) Glazing out-of-place (cracked or not) and not holed from impact forces
- (5) Glazing out-of-place and holed from impact forces
- (6) Glazing disintegrated from impact forces
- (7) Glazing removed prior to accident
- (9) Unknown if damaged

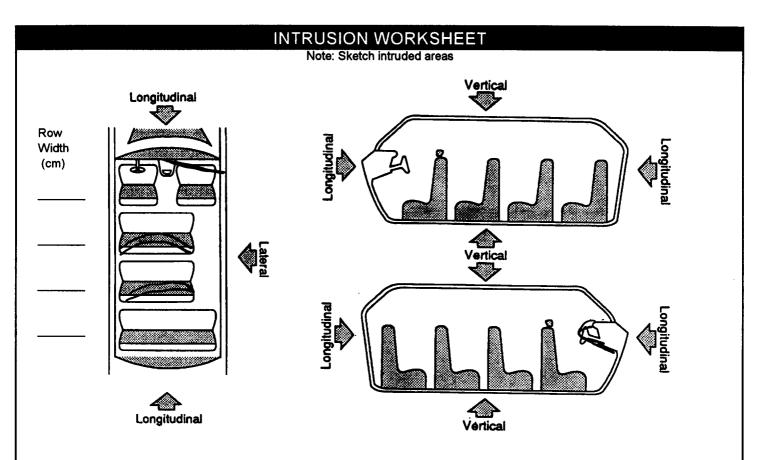
## **Glazing Damage from Occupant Contact**

39. WS\_\_\_ 40. LF / 41. RF / 42. LR / 43. RR /

- 44. BL / 45. Roof \$\psi\$ 46. Other \$9\$
  - (0) No glazing
  - (1) No occupant contact to glazing
  - (2) Glazing contacted by occupant but no glazing damage
  - (3) Glazing in place and cracked by occupant contact
  - (4) Glazing in place and holed by occupant contact
  - (5) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
  - (6) Glazing out-of-place by occupant contact and holed by occupant contact
  - Glazing removed prior to accident
  - (8) Glazing disintegrated by occupant contact
  - (9) Unknown if contacted by occupant

(9) Unknown

(8) Other failure (specify):



		2007-200-20		· · · · · · · · · · · · · · · · · · ·
LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON INT	nts Are In Centimeters) TRUDED INTRUSIO /ALUE =	DOMINANT CRUSH DIRECTION
		_	=	
		_	=	
		_	=	
		_	=	
			=	-
		_	=	
			=	
		_	=	***************************************
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J.		1		

#### National Accident Sampling System-Crashworthiness Data System: Interior Vehicle Form OCCUPANT AREA INTRUSION Note: If no intrusions, leave variables IV47-IV86 blank. INTRUDING COMPONENT Interior Components Dominant Location of Intruding Magnitude Crush (01) Steering assembly (02) Instrument panel left Intrusion Component of Intrusion Direction (03) Instrument panel center (04) Instrument panel right 1st 47. / 3 48. Ø 4 (05) Toe pan (06) A (A1/A2)-pillar (07) B-pillar (08) C-pillar 2nd 51. / 3 52. 46 53. 9 54. 2 (09) D-pillar (10) Side panel - forward of the A1/A2-pillar (11) Door panel (side) (12) Side panel - rear of the B-pillar 3rd 55. / 3 56. / 8 57. 9 58. 2 (13) Roof (or convertible top) (14) Roof side rail (15) Windshield 4th 59. 2 2 60. 2 1 61. 9 62. 2 (16) Windshield header (17) Window frame (18) Floor pan (includes sill) (19) Backlight header 5th 63. 2 3 64. 2 1 65. 9 66. 2 (20) Front seat back (21) Second seat back (22)Third seat back (23) Fourth seat back 6th 67. 37 68. 22 69. 9 70. 2 (24) Fifth seat back (25) Seat cushion (26) Back door/panel (e.g., tailgate) (27) Other interior component (specify): 7th 71.\_\_\_\_ 72.\_\_\_ 73.\_\_ 74.\_\_ **Exterior Components** (30) Hood 75.\_\_\_\_ 76.\_\_\_ 77. 78. (31) Outside surface of this vehicle (specify): 8th (32) Other exterior object in the environment (specify): 79.\_\_\_\_ 80. 81. 9th (33) Unknown exterior object 82. (97) Catastrophic (98) Intrusion of unlisted component(s) (specify): 10th 83.\_\_\_\_ 84.\_\_\_ 85.\_\_\_ 86.\_ (99) Unknown LOCATION OF INTRUSION MAGNITUDE OF INTRUSION (1) ≥ 3 centimeters but < 8 centimeters Front Seat Fourth Seat (2) ≥ 8 centimeters but < 15 centimeters (11) Left (41) Left (3) ≥ 15 centimeters but < 30 centimeters (42) Middle (4) ≥ 30 centimeters but < 46 centimeters (43) Right (5) ≥ 46 centimeters but < 61 centimeters

Second Seat	(12) (13)	Middle Right
(21) Left (22) Middle (23) Right	(21) (22)	Left Middle

# (97) Catastrophic

(98) Other enclosed area (specify)

# (99) Unknown

### **Third Seat** (31) Left

(32) Middle (33) Right

### DOMINANT CRUSH DIRECTION

(6) ≥ 61 centimeters

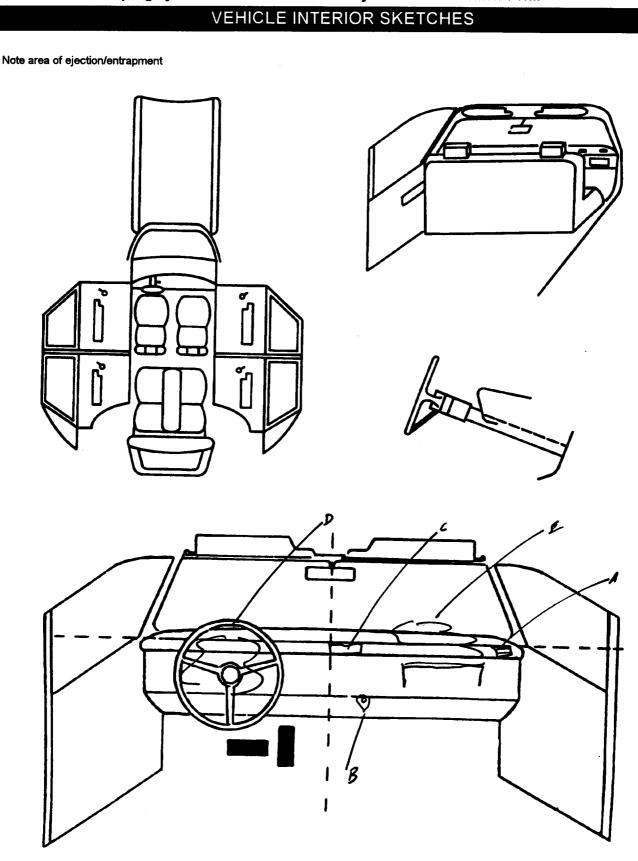
(7) Catastrophic

(9) Unknown

- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (7) Catastrophic
- (9) Unknown

ST	EERING	RIM/SPOKE DEFO	DRMATIC	N
		easurements Are in Centimet		
COMPARISON VALUE	<del></del>	DAMAGE VALUE	=	DEFORMATION
			=	
		<u> </u>	=	
			=	the state of the s
			=	
·				

INSTRUMENT PANEL
92. Odometer Reading 9 9 9 ,000 kilometers
Code to the nearest 1,000 kilometers (000) No odometer (001) Less than 1,500 kilometers (500) 499,500 kilometers or more
(999) Unknown miles X 1.6093 = kilometers
Source:  93. Instrument Panel Damage from Occupant Contact? (0) No (1) Yes (9) Unknown
94. Type of Knee Bolster Covering (0) No knee bolster (1) Padded (2) Rigid plastic (8) Other (specify): (9) Unknown  95. Knee Bolsters Deformed from Occupant Contact? (0) No knee bolster (1) No deformation
(2) Yes - deformation (9) Unknown  96. Did Glove Compartment Door Open During Collision(s)? (0) No glove compartment door (1) No - door did not open (2) Yes - door opened (9) Unknown  97. Adaptive (Assistive) Driving Equipment
(0) No adaptive driving equipment (1) Adaptive driving equipment installed (Check all that apply.) [] Hand controls for braking/acceleration [] Steering control devices (attached to OEM steering wheel [] Steering knob attached to steering wheel [] Low effort power steering (unit or device) [] Replacement steering wheel (i.e., reduced diameter) [] Joy-stick steering controls [] Wheelchair tie-downs [] Modification to seat belts (specify): [] Additional or relocated switches (specify): [] Raised roof [] Wall-mounted head rest (used behind wheelchair) [] Other adaptive device (specify):  (9) Unknown



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

	ident Sampling			CUPANT CONTACT		Page
Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical I	Evidence	Confidence Level of Contact Point
Α	412	42	R. 140,00	VENT RSHED IN WARD		2
В	411	ΦZ	L. FOUT	CIRCULAL IM PRESSION		3
С	411	-	-	DENTED		-
D	174	øı	HEAD	DEMONES	**************************************	2
E	186	42	FACE	DEPLOYED		1
F						
G				7.00 1.700		
Н						
1					Market Control of Cont	
J				20		
K						
L		***************************************				
М						
N						,
06) Steering v		LEFT SIDE (051) Left side excludir armrest	e interior surface, ng hardware or s e hardware or armrest A1/A2)-pillar	INTERIOR (151) Seat, back support (152) Belt restraint webbing/buckle (153) Belt restraint B-pillar or door frame attachment point (154) Other restraint system component (specify):	REAR (301) Backlight (rear (302) Backlight storag door, etc. (303) Other rear obje  ADAPTIVE (ASSISTIVI EQUIPMENT	ge rack, ct (specify):

#### selector lever, other attachment (800)Cellular telephone or CB radio Add on equipment(e.g., (009) tapedeck, air conditioner) (010)Left instrument panel and below (011)Center instrument panel and below (012)Right instrument panel and below

(014)Knee bolster Windshield including one or (015) more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)

Glove compartment door

(013)

(016) Windshield including one or more of the following: front header, A (A1/A2)-pillar. instrument panel, or mirror (passenger side only)

Windshield reinforced by (017) exterior object, (specify):

(019) Other front object (specify):

(055) Other left pillar (specify):

(056)Left side window glass (057) Left side window frame

(058)Left side window sill (059) Left side window glass including one or more of the following: frame, window sill,

A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (060)

(specify):

#### RIGHT SIDE

(101) Right side interior surface, excluding hardware or armrests

(102)Right side hardware or armrest

(103) Right A (A1/A2)-pillar (104)Right B-pillar

(105) Other right pillar (specify):

(106) Right side window glass (107) Right side window frame

(108)Right side window sill (109)Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.

(110) Other right side object (specify):

(155) Head restraint system

(160)Other occupants (specify):

(161) Interior loose objects

(162) Child safety seat (specify):

(163) Other interior object (specify):

#### AIR BAG

(170) Air bag-driver side (175)Air bag compartment

cover-driver side (180)Air bag-passenger side

(185)Air bag compartment cover-passenger side

(190) Other air bag (specify)

(195) Other air bag compartment cover (specify)

#### ROOF

(201) Front header

(202)Rear header

(203)Roof left side rail (204)Roof right side rail

(205) Roof or convertible top

#### **FLOOR**

(251) Floor (including toe pan) (252)Floor or console mounted

transmission lever, including console

(253)Parking brake handle (254)

Foot controls including parking brake

(401) Hand controls for braking/acceleration

Steering control devices (attached to OEM steering wheel)

(403)Steering knob attached to steering wheel

(405)Replacement steering wheel (i.e., reduced diameter)

(406)Joy stick steering controls

(407)Wheelchair tie-downs

(408)Modification to seat belts, (specify):

(409)Additional or relocated switches, (specify):

(410)Raised roof

Wall mounted head rest (used behind wheel chair)

Other adaptive device (specify):

# CONFIDENCE LEVEL OF

CONTACT POINT

(1) Certain

(2) Probable

Possible Unknown

NOTES: Excode the applicable data for each seat postflow in the vehicle. The attitute for the variable may be found below. Restral systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.  If a Child safety seat is present, encode the data on the back of this page.  If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.  Left Center Right  Availability F. Levidence of usage Used in this crash?  Proper Use Failure Modes Anchorage Adjustment  Availability J. J. J. Lap Law Law Law Law Law Law Law Law Law Law			M	ANUAL RES	TRAINTS			
If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.	NOTES	Encode the applicable data for essistems should be assessed du	each seat	position in the vel	nicle. The attribute ten coded on the Oc	for the va	riable ma	y be found below. Restrai
If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.		If a Child safety seat is present,	encode th	e data on the back	of this page.			
Left Center Right  Availability 4  Evidence of usage Used in this crash? Failure Modes Anchorage Adjustment Availability Evidence of usage Used in this crash? Proper Use Failure Modes Anchorage Adjustment  Availability  Evidence of usage Used in this crash? Proper Use Failure Modes Anchorage Adjustment  Availability  Evidence of usage Used in this crash?  Proper Use Failure Modes Anchorage Adjustment  Availability  Frailure Modes Anchorage Adjustment  Frailure Modes Anchorage Adjust						he hack	of the pre	vious page
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Anchorage Adjustment  Availability  Used in this crash?  Proper Use  Anchorage Adjustment  Availability  Bet removed/destroyed  Availability  Availability  Availability  Availability  Availability  Availability  Bet removed/destroyed  Bet vised properly with child safety seat (apport)  Bet vised properly  Bet vised properly  Availability  Availabilit	S							
Availability   A	Т	Failure Modes						
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Anchorage Adjustment    Availability	Ň		<del></del>				-	
Availability Evidence of usage Used in this crash? H Proper Use Failure Modes Anchorage Adjustment  Manual (Active) Belt System Availability (No None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Shoulder belt (ap belt) (6) Shoulder belt (ap belt) (7) Lap belt (specify): (8) Other belt (specify): (9) Unknown  Manual (Active) Belt System Use (10) None used or not available (11) Belt used properly (2) Shoulder belt worn belind back or seat lap belt worn abdomen destroyed/removed) (3) Shoulder belt worn belind back or seat lap belt worn abdomen destroyed/removed) (6) Shoulder belt (ap belt worn abdomen destroyed/removed) (7) Lap belt (specify): (8) Unknown  Manual (Active) Belt System Use (10) Inoperable (specify): (9) Unknown  Manual (Active) Belt System Use (10) Inoperable (specify): (11) No manual belt used or not available (11) No manual belt used or not available (12) Shoulder belt used with child safety seat (13) Lap bet used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat (15) Belt used with child safety seat (specify): (16) Other belt used with child safety seat (specify): (17) Unknown (18) Other belt used with child safety seat (specify): (19) Unknown (19) Unkn	D							
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Used in this crash? Proper Use Failure Modes Anchorage Adjustment  Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (2) Belt used property (3) Shoulder belt (4) Lap and shoulder belt (5) Belt available (6) Shoulder belt (ap belt (7) Lap belt (shoulder belt (8) Other belt (specify): (9) Unknown  Manual (Active) Belt System Use (10) None used or not available (11) Belt used or not available (12) Belt used with child safety seat (13) Lap belt (14) Lap and shoulder belt (15) Belt available. The standard property (16) Shoulder belt (ap belt (17) Lap belt (shoulder belt (18) Delt (shoulder belt (19) Unknown  Manual (Active) Belt System Use (19) Unknown  Manual (Active) Belt System Use (20) Shoulder belt (21) Shoulder belt (22) Shoulder belt (23) Shoulder belt (24) Lap belt (25) Belt available, or not available, or belt removed/destoryed/removed) (18) Unknown  Manual (Active) Belt System Use (29) Unknown  Manual (Active) Belt Failure Modes During Accident (20) No manual belt sailure(s) (21) Shoulder belt (22) Shoulder belt (23) Shoulder belt (24) Lap belt (25) Shoulder belt (26) Shoulder belt (27) Shoulder belt (28) Shoulder belt (29) Unknown  Manual (Active) Belt Failure Modes During Accident (19) No manual belt sailure(s) (10) No manual belt sailure(s) (11) No manual belt sailure(s) (12) Shoulder belt (13) Lap belt (14) Lap and shoulder belt (15) Belt used with child safety seat (16) Shoulder belt used with child safety seat (17) Lap belt used with child safety seat (18) User anchorage separated (19) User separated (19) User anchorage separated (19) User anchorage separated (19) User anchorage separated (19) User anchorage separated (19) User anchorage separated (20) User anchorage separated (30) User anchorage separated (31) User anchorage separated (32) User anchorage separated (33) User anchorage separated (34) User anchorage separated (35)				4				4
Proper Use   Failure Modes   Anchorage Adjustment		***						
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Manual (Active) Belt System Availability (0)   None available (1)   Belt removed/destroyed (2)   Shoulder belt (2)   Belt used properly (3)   Shoulder belt (3)   Lap belt or lap and shoulder belt (4)   Lap and shoulder belt (5)   Belt was destroyed/removed/ (4)   Shoulder belt wom to belt wom to belt was destroyed/removed (6)   Shoulder belt (6)   Lap belt or lap and shoulder belt (6)   Lap belt or lap and shoulder belt (6)   Cher improper use of manual belt system (specify):    Manual (Active) Belt System Use (00)   None used, not available, or belt removed/destroyed (101)   Lap belt or lap and shoulder belt was distributed by the system (specify):    Manual (Active) Belt System Use (101)   Lap belt or lap and shoulder belt used improperly with child safety seat (specify):    Manual (Active) Belt System Use (101)   Lap belt or lap and shoulder belt used improperly with child safety seat (specify):    Manual (Active) Belt System Use (101)   Unknown (specify):    Manual (Active) Belt System Use (102)   Shoulder belt (103)   Lap belt used with child safety seat (104)   Lap and shoulder belt (105)   Belt used - type unknown (106)   Unknown (106)   Broken buckle or latchplate (106)   Broken buckle or latchplate (107)   Combination of above (specify):    Manual (Active) Belt used with child safety seat (specify):    Manual (Active) Belt used with child safety seat (specify):    Manual (Active) Belt System Use (101)   No manual belt sailure(s)   No manual belt sailure(s)   No manual belt sailure(s)   Other anchorage separated (specify):    Manual (Active) Belt used with child safety seat (specify):    Manual (Active) Belt used with child safety seat (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (specify):    Manual (Active) Belt System Use (spe	Ŕ	Failure Modes						
(0) None available (1) Belt used properly (2) Shoulder belt (2) Shoulder belt (2) Belt used properly with child safety seat (3) Lap belt (4) Lap and shoulder belt (5) Belt available - type unknown (6) Shoulder belt worn under arm (7) Shoulder belt worn under arm (8) Shoulder belt worn under arm (8) Shoulder belt worn under arm (9) Shoulder belt worn under arm (9) Shoulder belt under belt (1) No upper anchorage adjustment for shoulder belt (1) No upper anchorage adjustment (1) No upper anchorage adjustment (2) In full up position (3) In mid position (4) In full down position improperly with child safety seat (5) Other improper use of manual belt system (specify):  (1) Unknown  Manual (Active) Belt System Use (2) Unknown  Manual (Active) Belt System Use (3) In full down position improperly with child safety seat (4) In operable (specify):  (1) Unknown  Manual (Active) Belt System Use (5) Unknown  (1) No manual belt used or not available (1) No manual belt used or not available (1) No manual belt aliure(1) Shoulder belt used with child safety seat (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper anchorage separated (1) Upper a		Anchorage Adjustment		1				1
(03) Lap belt (2) Torn webbing (stretched webbing not included) (04) Lap and shoulder belt included) (05) Belt used - type unknown (3) Broken buckle or latchplate (08) Other belt used (specify): (4) Upper anchorage separated (12) Shoulder belt used with child safety seat (5) Other anchorage separated (specify):  (13) Lap belt used with child safety seat (6) Broken retractor (14) Lap and shoulder belt used with child safety seat (7) Combination of above (specify):  (15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (59) Unknown	(0) (1) (2) (3) (4) (5) (6) (7) (8) (7) (8) (9) (9) (01)	None available Belt removed/destroyed Shoulder belt Lap belt Lap and shoulder belt Belt available - type unknown  ral Belt Partially Destroyed Shoulder belt (lap belt destroyed/removed) Lap belt (shoulder belt destroyed/removed) Other belt (specify):  Unknown  (Active) Belt System Use None used, not available, or belt removed/destroyed Inoperable (specify):	(0) (1) (2) Belt (3) (4) (5) (6) (7) (8) (9) Manual (Accident (0)	None used or not a Belt used properly Belt used properly Shoulder belt worn Shoulder belt worn Belt worn around m Lap belt or lap and improperly with chil (specify): Other improper use system (specify): Unknown  Active) Belt Failure II No manual belt use	wailable with child safety seat under arm behind back or seat iore than one person idomen shoulder belt used d safety seat of manual belt  Modes During d or not available	(2) (3) (4) (5)	No should No upper shoulder  Adjustable Anchorage In full up In mid pool In full down Position u Unknown	der belt anchorage adjustment for belt e shoulder Belt Upper ge position sition vn position inknown if position has adjustable
(04) Lap and shoulder belt included) (05) Belt used - type unknown (08) Other belt used (specify): (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat (16) Broken retractor (17) Combination of above (specify): safety seat (18) Other belt used with child safety seat (19) Unknown (18) Other belt used with child safety seat (19) Unknown			1_1					
(08) Other belt used (specify): (4) Upper anchorage separated (5) Other anchorage separated (6) Other anchorage separated (7) Shoulder belt used with child safety seat (8) Eroken retractor (9) Other manual belt failure (specify): (8) Other manual belt failure (specify): (8) Unknown (18) Other belt used with child safety seat (9) Unknown	(04)	Lap and shoulder belt	(-/	included)				
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (5) Other anchorage separated (specify):  (5) Other anchorage separated (specify):  (7) Combination of above (specify):  (8) Other manual belt failure (specify):  (9) Unknown	• ,				•			
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (specify):  (17) Combination of above (specify):  (8) Other manual belt failure (specify):  (9) Unknown	(00)	Other beit used (specify):		Other anchorage se	eparated eparated			
(14) Lap and shoulder belt used with child (7) Combination of above (specify): safety seat (15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (specify): (9) Unknown	(12)	•	(0)		parateu			
safety seat (15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (specify): (9) Unknown	1							
(15) Belt used with child safety seat - type unknown (18) Other belt used with child safety seat (specify): (9) Unknown	(14)	5 .	(7)	Combination of abo	ve (specify):			
(specify):	(15)	Belt used with child safety seat - type	(8)	Other manual belt for	ailure (specify):			
		(specify):	(9)	Unknown				

# **AUTOMATIC RESTRAINTS**

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

### **AIR BAGS**

		Left Front	Right Front	Other
F	Availability/Function		1	
Ŕ	Deployment	1	1	
T	Failure	1	1	

### Air Bag System Availability/Function

- (0) Not equipped/not available
- (1) Air bag

#### Non-functional

- (2) Air bag disconnected (specify):
- (3) Air bag not reinstalled
- (9) Unknown

#### Are There Indications of Air Bag System Failure? (This Occupant Position)

- (0) Not equipped/not available
- No (1)
- Yes (specify): (2)
- Unknown

#### Frontal Air Bag System Deployment (This Occupant Position)

- (0) Not equipped/not available
- Deployed during accident (as a result of (1) impact)
- (2) Deployed inadvertently just prior to accident

sequence

- (3) Deployed, accident undetermined
- (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (5) Unknown if deployed
- (7) Nondeployed
- (9) Unknown

#### Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)

- (0) Not equipped with an "other" air bag
- (1) Deployed during accident (as a result of impact)
- Deployed inadvertently just prior to accident
- (3) Deployed, details unknown
- (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- Unknown if deployed
- (7) Nondeployed
- Unknown

### **AUTOMATIC BELTS**

	·	Left	Right
	Availability/Function		
F	Use		
Ŕ	Туре		
S   T	Proper Use	/	
	Failure Modes		

#### Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- 3 point automatic belts
- (3) Automatic belts type unknown

#### Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

#### Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

# Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

#### Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- Automatic belt used properly with child safety seat

#### Automatic Belt Used Improperty

- (3) Automatic shoulder belt worn under arm
- Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or
  - automatic shoulder belt used
  - with child safety seat (specify):
- (8) Other improper use of automatic belt system (specify):
- Unknown

#### Automatic (Passive) Belt Failure Modes **During Accident**

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- Torn webbing (stretched webbing not included)
- Broken buckle or latchplate
- Upper anchorage separated
- (5) Other anchorage separated (specify):
- Broken retractor
- Combination of above (specify):
- Other automatic belt failure (specify):
- (9) Unknown

# FIRST SEAT FRONTAL AIR BAGS

NOTES: Encode the applicable data for the driver and first seat passenger in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

	Driver	Passenger
Type of air bag?	/	/
Flaps open at tear points?	2	2
Flaps damaged?	9	9
Air bag damaged?	9	9
Source of air bag damage	G	9
Air bag tethered?	9	9
Air bag have vent ports?	9	9
Other occupant contact air bag?	9	9
Occupant wearing eyewear?	9	9

### Type of Air Bag

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

# Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

# Were Air Bag Module Cover Flap(s) Damaged?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

#### Was There Damage To The Air Bag?

- (00) Not equipped/not available
- (01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify):
- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

#### Source of Air Bag Damage

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify):
- (03) Object carried by occupant, (specify):
- (04) Adaptive/assistive controls, (specify):
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify):
- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

#### Was The Air Bag Tethered?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps):
- (3) Deployed, unknown if tethered
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

### Did The Air Bag Have Vent Ports?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports):
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

# Was the Air Bag in this Occupant's Position Contacted by Another Occupant?

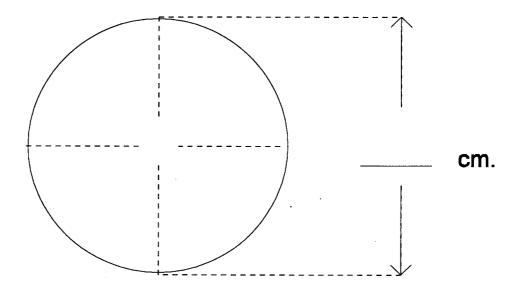
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

# Was This Occupant Wearing Eye-wear?

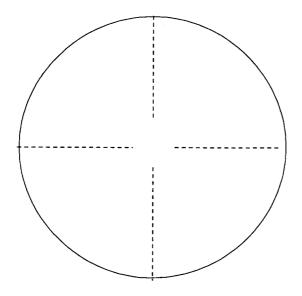
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

# DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front)



2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)



DRIVER AIR BAG S	SKETCHES (Cont'd)
3. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE) a. Upper Flap  width (W <sub>U</sub> ) width (W <sub>L</sub> )  height (H <sub>U</sub> ) height (H <sub>L</sub> )  H <sub>L</sub> H <sub>L</sub> W <sub>L</sub> ————————————————————————————————————	
SKETCH OF OTHER TYPE OF AIR BAG MODULE     FLAP AND SIZE	5. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS
FLAP AIND SIZE	
	6. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS
	9 3 8 4 7 6 5

PASSENGER AIR BAG	G SKETCHES (Cont'd)
3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE) a. Flap width (W) height (H)  H	4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)  a. Upper Flap  width (W <sub>U</sub> )  height (H <sub>U</sub> )  W  H,  H,  H,  W  W  M  A  A  B  A  B  A  B  B  B  B  B  B  B
5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE	6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS
	7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS  10 11 12 1 2 9 3 8 7 6 5 4

	"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES	
1.	SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)	
		:
2.	SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Back)	

"OTHER" AIR BAG SKETCHES (Con	t'd)
3. SKETCH AIR BAG MODULE FLAP AND SIZE OR OPENING FOR AIRBAG	
4. SKETCH AIR BAG VENT PORTS	

# **HEAD RESTRAINTS/SEAT EVALUATION**

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
	Head Restraint Type/Damage			/
F	Seat Type	42		92
1	Seat Performance	9		9
R S	Seat Orientation	1		1
Т	Seat Track Position	9		9
	Seat Back Incline Pre/Post Impact		/	
	Head Restraint Type/Damage	9	9	9
Q	Seat Type	45	05	45
SEC	Seat Performance	9	9	9
0	Seat Orientation	,	,	/
N D	Seat Track Position	9	9	9
	Seat Back Incline Pre/Post Impact			
	Head Restraint Type/Damage	<b>Q</b>	4	4
Т	Seat Type	45	45	45
H	Seat Performance	9	9	9
Ŕ	Seat Orientation	1	1	1
D	Seat Track Position	9	9	9
	Seat Back Incline Pre/Post Impact			
	Head Restraint Type/Damage			
Ō	Seat Type			
T H	Seat Performance			
E R	Seat Orientation			
	Seat Track Position		,	
	Seat Back Incline Pre/Post Impact			

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

# HEAD RESTRAINTS/SEAT EVALUATION

#### Head Restraint Type/Damage by Occupant at This Occupant **Position**

- (0) No head restraints
- (1) Integral no damage(2) Integral damaged during accident
- (3) Adjustable no damage
- (4) Adjustable damaged during accident
- (5) Add-on no damage(6) Add-on damaged during accident
- Other Specify):
- (9) Unknown

### **Seat Performance (this Occupant** Position)

- (0) Occupant not seated or no seat
- No seat performance failure(s)
- Seat adjusters failed
- Seat back folding locks or "seat back" failed (specify):
- Seat tracks/anchors failed
- Deformed by impact of occupant
- Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

#### Seat Back Incline Prior and Post Impact Occupant not seated or no seat (00)

- (01) Not adjustable

### Upright prior to impact

- $(11)^{-}$ Moved to completely rearward position
- (12)Moved to rearward midrange position
- (13)Moved to slightly rearward position
- (14)Retained pre-impact position
- (15) Moved to slightly forward position
- (16)Moved to forward midrange position
- (17)Moved to completely forward position

Slightly reclined prior to impact

# **Seat Type (this Occupant Position)**

- Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- Bench with folding back(s) (05)
- (06)Split bench with separate back cushions
- Split bench with folding back(s)
- (08)Pedestal (i.e., column supported)
- (09)Other seat type (specify):
- (10) Box mounted seat (i.e., van type)
- (99)Unknown

- Occupant not seated or no seat
- Forward facing seat
- Rear facing seat

#### **Seat Orientation (this Occupant** Position)

- Side facing seat (inward)
- Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

## Seat Track Adjusted Position Prior To **Impact**

- Occupant not seated or no seat
- (1) Non-adjustable seat track

# Adjustable Seat Track

- (2) Seat at forward most track position(3) Seat between forward most and
- middle track positions
- Seat at middle track position
- Seat between middle and rear most track positions
- Seat at rear most track position
- (9) Unknown

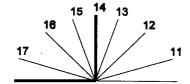
#### Moved to completely rearward (21) position

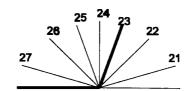
- (22)Moved to rearward midrange
- position
- Retained pre-impact postion (23)
- (24) Moved to upright position
- Moved to slightly forward position (25)
- (26) Moved to forward midrange position
- Moved to completely forward (27)position

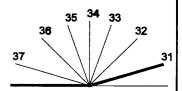
# Completely reclined prior to impact

- Retained pre-impact position
- (32) Moved to rearward midrange position
- (33)Moved to slightly rearward position
- (34)
- Moved to upright position

  Moved to slightly forward position (35)
- (36) Moved to forward midrange position
- (37)Moved to completely forward position
- (99) Unknown







Coding diagrams for Seat Back Incline Position Prior and Post Impact

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

	nen a child safety seat is present enter the cupant's number using the codes listed belo						nn below the
Oc	cupant Number			-			
1.	Type of Child Safety Seat						
2.	Child Safety Seat Orientation						
3.	Child Safety Seat Harness Usage						
4.	Child Safety Seat Shield Usage						
<b>5</b> .	Child Safety Seat Tether Usage						
6.	Child Safety Seat Make/Model	Specify	Below	for Ea	ch Child Safety	Seat	
1.	Type of Child Safety Seat	;	3. Cł	nild Saf	fety Seat Harne	ss Usage	
	(0) No child safety seat (1) Infant seat	4	4. Cł	nild Sat	ety Seat Shield	Usage	
	(2) Toddler seat	!	5. Cł	ild Sat	fety Seat Tether	r Usane	
	(3) Convertible seat (4) Booster seat	·			tions Below Are		ables 3-5.
	(7) Other type child safety seat (specify):		(0	0) No	child safety sea	at	
	(8) Unknown child safety seat type (9) Unknown if child safety seat used			1) Afte	gned with Harne er market harne ded, not used		
2.	Child Safety Seat Orientation			2) Afte	er market harne		
	(00) No child safety seat		(0:		ild safety seat u ness/shield/teth		er market
	Designed for Rear Facing for This Age/Weight (01) Rear facing		(0	9) Uni	known if harnes ded or used		
	(02) Forward facing				l With Harness/		
	(08) Other orientation (specify):				rness/shield/tetl rness/shield/tetl		
	(09) Unknown orientation		(19	9) Uni	known if harnes	ss/shield/tether	used
	Designed for Forward Facing for This				If Designed W		ield/Tether
	Age/Weight (11) Rear facing				rness/shield/tetl rness/shield/tetl		
	(12) Forward facing				known if harnes		used
	(18) Other orientation (specify):		(99	9) [[n]	known if child s	afety seat used	
	(19) Unknown orientation		-	•		•	
	Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight	•	6. Ch (S	nild Saf pecify i	ety Seat Make/I make/model an	Model d occupant nui	mber)
	(21) Rear facing (22) Forward facing	-					
	(28) Other orientation (specify):	-					
	(29) Unknown orientation	<del></del>					
	(99) Unknown if child safety seat used	_					

CHILD SAFETY SEAT FIELD ASSESSMENT

	EJECTION/ENTRAPMENT DA	ΤΑ		
Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.				
EJECTION No [ / Yes [ ]	pody parts involved in partial ejection(s):			
Occupant Number				
Ejection				
(Note on Vehicle Interior Sketch) Ejection Area				
Ejection Medium				
Medium Status				
Ejection (1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify):  (9) Unknown	(5) Integral structure (8) Other medium (specify):  (9) Unknown		
Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear	Ejection Medium  (1) Door/hatch/tailgate  (2) Nonfixed roof structure  (3) Fixed glazing  (4) Nonfixed glazing (specify):	Medium Status (Immediately Prior to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown		
ENTRAPMENT No [ Yes [ Describe entrapment mechanism:	]			
(Note in vehicle interior diagram)				



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB 16	10. Occupant's Seat Position
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u><math>\varphi</math></u> /	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month):	Second Seat (21) Left side (22) Middle
(97) 97 years and older (99) Unknown	(23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant  Fourth Seat
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown  75 inches X 2.54 = 191 centimeters	(41) Left side (42) Middle (43) Right side (44) Other (specify):
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown  2	11. Occupant's Posture (0) Normal posture  Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify):

EJE	CTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	φ	15. Medium Status (Immediately Prior To Impact)  (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown  14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):	<u>\$</u>	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

	BELT SYST	EM FUNCTION	
18.	Manual (Active) Belt System Availability  (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown  Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed)	(0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt  Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper	5
19.	<ul> <li>(7) Lap belt (shoulder belt destroyed/removed)</li> <li>(8) Other belt (specify):</li> <li>(9) Unknown</li> <li>Manual (Active) Belt System Use</li> <li>(00) None used, not available, or belt removed/destroyed</li> <li>(01) Inoperative (specify):</li> <li>(02) Shoulder belt</li> <li>(03) Lap belt</li> <li>(04) Lap and shoulder belt</li> <li>(05) Belt used—type unknown</li> <li>(08) Other belt used (specify):</li> </ul>	anchorage adjustment  23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown  Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown  24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or	• <u> </u>
20.	(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used  Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat  Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	rendered inoperative  (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown  25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (2) Motorized system (9) Unknown  26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly (3) Automatic belt used properly (4) Automatic shoulder belt worn under arm (5) Automatic shoulder belt worn behind back (6) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen	<b>,</b>
21.	Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):  (8) Other improper use of automatic belt system (specify): (9) Unknown  27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):	· ·
		(9) Unknown	

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown"  29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use.  [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):    PAK [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	<ul> <li>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)</li> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> <li>34. Are There Indications of Air Bag System</li> </ul>
	Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)?  (0) Not equipped/not available (1) No previous accidents  Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag  (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? 9  (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown  43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):  (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYS EVALUATION continued	TEM	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify):  (03) Object carried by occupant, (specify):  (04) Adaptive/assistive controls, (specify):  (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify):  (95) Damaged, unknown source	99	49. Head Restraint Type/Damage by Occupant at This Occupant Position  (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown  50. Seat Type (this Occupant Position)  (00) Occupant not seated or no seat (01) Bucket
45.	<ul> <li>(96) Deployed, unknown if damaged</li> <li>(97) Not deployed</li> <li>(98) Unknown if deployed</li> <li>(99) Unknown</li> <li>Was The Air Bag Tethered?</li> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify number of tether straps):</li> </ul>	9	(02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
46.	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	<u>9</u>	(99) Unknown  51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
<b>47</b> .	(3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown  Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify):	<u> </u>	(9) Unknown  52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track  Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions
48.	<ul> <li>(3) Deployed, unknown if other occupant corair bag</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> <li>Was This Occupant Wearing Eye-wear?</li> </ul>	ntact to	<ul> <li>(4) Seat at middle track position</li> <li>(5) Seat between middle and rear most track positions</li> <li>(6) Seat at rear most track position</li> <li>(9) Unknown</li> </ul>
	<ul> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Eyeglasses/sunglasses</li> <li>(3) Contact lenses</li> <li>(4) Deployed, unknown if eyewear worn</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>		

## HEAD RESTRAINT AND SEAT EVALUATION continued

- 53. Seat Back Incline Prior and Post Impact (00) Occupant not seated or no seat
  - (01) Not adjustable

#### Upright prior to impact

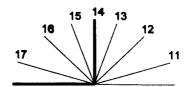
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

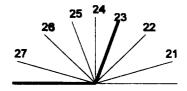
#### Slightly reclined prior to impact

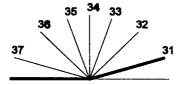
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

## Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
  - (0) Occupant not seated or no seat
  - (1) No seat performance failure(s)
  - (2) Seat adjusters failed
  - (3) Seat back folding locks or "seat back" failed (specify):
  - (4) Seat track/anchors failed
  - (5) Deformed by impact of occupant
  - (6) Deformed by passenger compartment intrusion, (specify):
  - (7) Combination of above (specify):
  - (8) Other (specify): \_\_\_\_
  - (9) Unknown







	CHILD SAF	FETY SEAT
(000) No child safety seat Applicable codes are found in your NASS Data Collection, Coding and Editing (950) Built-in child safety seat	4 4 4 S CDS	58. Child Safety Seat Harness Usage   4 4  59. Child Safety Seat Shield Usage   4 4
(997) Other make/model (specify):  (998) Unknown make/model (999) Unknown if child safety seat used  56. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify):  (8) Unknown child safety seat used	<b>4</b>	Note: Options below applicable to Variables OA58-OA60. (00) No child safety seat  Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used
57. Child Safety Seat Orientation (00) No child safety seat  Designed for Rear Facing for This Age/W (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation  Designed For Forward Facing for This Ag (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation  Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used		Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used  Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

IN HIDV CONSEQUENCES			
INJURY CONSEQUENCES  61. Injury Severity (Police Rating)  (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):  Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown treated (9) Unknown	<u>3</u>	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown  64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	9
_			-
0.74			

## STOP WORK HERE

**VARIABLES 66-74** 

INJURY CONSEQUENCES	TRAUMA DATA
66. Time to Death  Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60)  (00) Not fatal  (96) Fatal - ruled disease  (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death  68. 2nd Medically Reported Cause of Death	72. Was the Occupant Given Blood?  (1) No - blood not given  (2) Yes - blood given  (specify units):
69. 3rd Medically Reported Cause of Death  Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  (00) Not fatal or no additional causes  (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  (97) Other result (includes fatal ruled disease) (specify):	(9) Unknown if blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (00) Not injured  (01) Injured, ABGs not measured or reported  (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown  (97) Injured, details unknown  (99) Unknown if injured
70. Number of Recorded Injuries for This OccupantCode the actual number of injuries recorded for this occupant.  (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): fblice (9) Unknown if belt used

U.S. Department of Transportation

1. Primary Sampling Unit Number

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

BEST AVAILABLE

National Highway Traffic Safety Administration

3. Vehicle Number

41

2. Case Number - Stratum

AB

4. Occupant Number

41

### **INJURY DATA**

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

			A.I.S 90				Injury		Occupant	
Source of Injury	Body	Type of Anatomic	Specific Anatomic	Level of	A.I.S.		Injury	Source Confidence	Direct/ Indirect	Area
Data	Region	Structure	Structure	Injury	Severity	Aspect	Source	Level	Injury	Intrusion Number

										-,,	
ist	5. <u>7</u>	6_1	7. <u>5</u>	a_ <u>/8</u>	9.44	10. 2	n <u>2</u>	12 <u>494</u>	13.2	14. <u>2</u>	15. <b>4</b> \$
2nd	16. <u>7</u>	17. 7	18. 5	19/8_	20. <u>9.4</u>	21.2	22.2	23 <u>404</u>	24. <u>~</u>	25.2	26. <u>4 4</u>
3rd	27 <u>7</u>	288	29. 5	30. <u>/ 8</u>	31. <u>42</u>	32 <u></u>	33	34. <u>254</u>	35. <u>2</u>	36. <u>2</u>	37. <u>44</u>
4th	38	39	40	41	42	43	44	45	46	47	48
5th	49	50	51	52	53	54,	55	56	57	58	59
6th	60	<b>51</b>	62	63	64	65	66	67	68	69	70
7th	71	72	73	74	75	78	77	78	79	80	81
8th	82	83	84	85	66	87	88	89	90	81. <u> </u>	92
9th	93	94	96	96	97	98	99:	100	101	102	103
10th	104	105	106	107	108	109	110	111	112	<b>113</b>	114

Source   Type of Specific   Specific   Structure   S	
12th	Occupan Area Intrusion Number
3th	
by	
h	
m	
h	
<b>4</b>	

### OCCUPANT INJURY CLASSIFICATION

#### **Body Region**

- Head
- Face
- Neck
- Thorax
- (2) (3) (4) (5) (6) Abdomen
- Spine
- (7)Upper Extremity
- Lower Extremity (8)
- Unspecified

#### Type of Anatomic Structure

- Whole Area
- Vessels
- Nerves
- (2) (3) (4) Organs (includes Muscles/ligaments)
- Skeletal (includes (5)
- joints) Head LOC
- (9) Skin

#### **Specific Anatomic** Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

#### Whole Area

- (02)Skin - Abrasion
- Skin Contusion (04)
- (06)Skin - Laceration
- Skin Avulsion (08)
- (10) **Amputation**
- (20)Burn
- (30)Crush
- (40) Degloving
- (50)Injury - NFS
- (90) Trauma, other than mechanical

- Head LOC (02) Length of LOC
- (04) Level
- (06) of
- (80) Consciousness
- (10) Concussion

#### **Spine**

- Cervical (02)
- (04)Thoracic
- (06) Lumbar

#### Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS. 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

#### **Abbreviated Injury Scale**

- Minor Injury
- (2) (3) Moderate Injury
- Serious Injury
- Severe Injury (4)
- Critical Injury (5) **(6)** Maximum
- (untreatable)
- lnjured, unknown severity

#### **Aspect**

- Right
- Left
- (2) (3) **Bilateral**
- (4) (5) Central
- Anterior
- (6)Posterior Superior
- (8) Inferior
- (9)Unknown
- (0)
  - Whole region

## SOURCE OF INJURY DATA

### OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

#### **UNOFFICIAL RECORDS**

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

#### **INJURY SOURCE**

# CONFIDENCE LEVEL

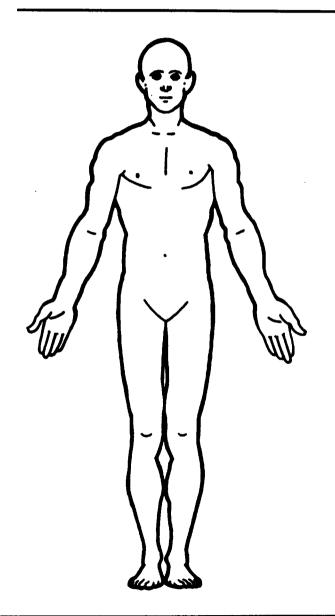
- (1) Certain
- (2) Probable
- Possible
- (9) Unknown

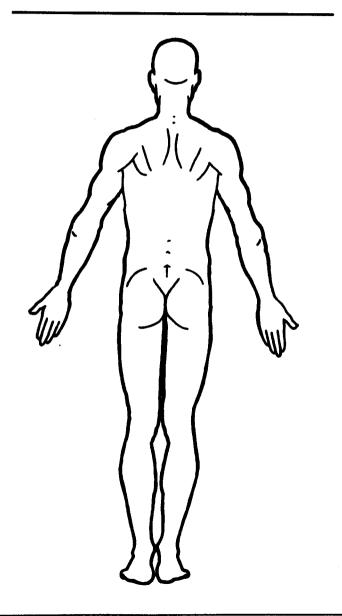
#### DIRECT/INDIRECT INJURY

- Direct contact injury
- Indirect contact injury
- Noncontact injury
- Injured, unknown source

			INJURY				
FRON		(102)	•	(183)	Air bag-passenger side and	(411)	Wall mounted head rest (use
(001)			armrest		object held		behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	• • • • • • • •	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	•		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	Air bag compartment		RIOR of OCCUPANT'S
(00T)	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	
(007)	Steering column, transmission	(108)	Right side window sill		eyewear	(451)	Hood
	selector lever, other	(109)	Right side window glass	(187)	• •	(452)	Outside hardware (e.g.,
	attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
(800)	Cellular telephone or CB radio		following: frame, window sill,		jewelry	(453)	Other exterior surface or tires
(009)	Add on equipment (e.g., tape		A (A1/A2)-pillar, B-pillar, or	(188)			(specify):
	deck, air conditioner)		roof side rail.		cover-passenger side and		
(010)	Left instrument panel and	(110)	•		object held	(454)	Unknown exterior objects
	below		(specify):	(189)	Air bag compartment		
(011)	Center instrument panel and				cover-passenger side and	EXTE	RIOR OF OTHER MOTOR
	below				object in mouth	VEHIC	CLE
(012)	Right instrument panel and	INTER		(190)	Other air bag (specify)	(501)	Front bumper
	below		Seat, back support			(502)	
(013)	Glove compartment door	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(503)	Other front of vehicle
(014)	Knee bolster	(153)	Belt restraint B-pillar or door		cover (specify)		(specify):
(015)	Windshield including one or		frame attachment point				
	more of the following: front	(154)	Other restraint system			(504)	Hood
	header, A (A1/A2)-pillar,		component (specify):	ROOF		(505)	Hood ornament
	instrument panel, mirror, or			(201)	Front header	(506)	Windshield, roof rail, A-pillar
	steering assembly (driver side	(155)	Head restraint system	(202)	Rear header	(507)	Side surface
	only)	(160)	Other occupants (specify):	(203)	Roof left side rail	(508)	Side mirrors
(016)	Windshield including one or			(204)	Roof right side rail	(509)	Other side protrusions
	more of the following: front	(161)	Interior loose objects	(205)	Roof or convertible top	` '	(specify):
	header, A (A1/A2)-pillar,	(162)	Child safety seat (specify):	` '	•		( ), ·
	instrument panel, or mirror			FLOO	R	(510)	Rear surface
	(passenger side only)	(163)	Other interior object (specify):	(251)	Floor (including toe pan)	(511)	
(017)	Windshield reinforced by	` '	,	(252)	Floor or console mounted	(512)	Tires and wheels
` ,	exterior object (specify)			(===,	transmission lever, including	(513)	
	,	AIR B	AG		console	(515)	vehicle (specify):
(019)	Other front object (specify):		Air bag-driver side	(253)	Parking brake handle		vernicie (specity).
<b>(</b> )			Air bag-driver side and	(254)	Foot controls including	(514)	Unknown exterior of other
		(17.17	eyewear	(254)	parking brake	(314)	
LEFT S	SIDE	(172)	Air bag-driver side and jewelry		parking brake		motor vehicle
(051)	Left side interior surface,	(173)	Air bag-driver side and object	REAR		OTHE	R VEHICLE OR OBJECT IN
(551)	excluding hardware or	(173)	held				
		(474)		(301)	• '		ENVIRONMENT
(OE2)	armrests	(174)	· · · · · · · · · · · · · · · · · · ·	(302)	Backlight storage rack,	(551)	
	Left side hardware or armrest	/4	in mouth		door, etc.	(598)	•
	Left A (A1/A2)-pillar	(175)	Air bag compartment	(303)	Other rear object (specify):		(specify):
- ,	Left B-pillar		cover-driver side				
(055)	Other left pillar (specify):	(176)	Air bag compartment			(599)	Unknown vehicle or object
			cover-driver side and eyewear	ADAP	TIVE (ASSISTIVE) DRIVING		
	Left side window glass	(177)	Air bag compartment	EQUIP	PMENT	NON	CONTACT INJURY
(057)	Left side window frame	٠.	cover-driver side and jewelry	(401)	Hand controls for	(601)	Fire in vehicle
(058)	Left side window sill	(178)	Air bag compartment		braking/acceleration	(602)	Flying glass
(059)	Left side window glass		cover-driver side and object	(402)	Steering control devices	(603)	Other noncontact injury
	including one or more of the		held	,	(attached to OEM steering		source
	following: frame, window sill,	(179)	Air bag compartment		wheel)		(specify):
	A (A1/A2)-pillar, B-pillar, or	. •	cover-driver side and object in	(403)	Steering knob attached to	(604)	
	roof side rail.		mouth		steering wheel	(697)	Injured, unknown source
	Other left side object	(180)	Air bag-passenger side	(405)	Replacement steering wheel	(-2.)	,
		(181)	Air bag-passenger side and	(,	(i.e., reduced diameter)		
(060)	(specify):			/ 40 m	Joy stick steering controls		
(060)	(specify):	(,	evewear	(40)81			
(060)	(specify):		eyewear Air hag-passenger side and	(406) (407)	· ·		
(060)		(182)	Air bag-passenger side and	(407)	Wheelchair tie-downs		
(060) RIGHT	SIDE		•		Wheelchair tie-downs Modification to seat belts,		
(060) RIGHT (101)	SIDE Right side interior surface,		Air bag-passenger side and	(407) (408)	Wheelchair tie-downs Modification to seat belts, (specify):		
(060) RIGHT (101)	SIDE Right side interior surface, excluding hardware or		Air bag-passenger side and	(407)	Wheelchair tie-downs Modification to seat belts, (specify): Additional or relocated		
(060) RIGHT (101)	SIDE Right side interior surface,		Air bag-passenger side and	(407) (408)	Wheelchair tie-downs Modification to seat belts, (specify):		

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

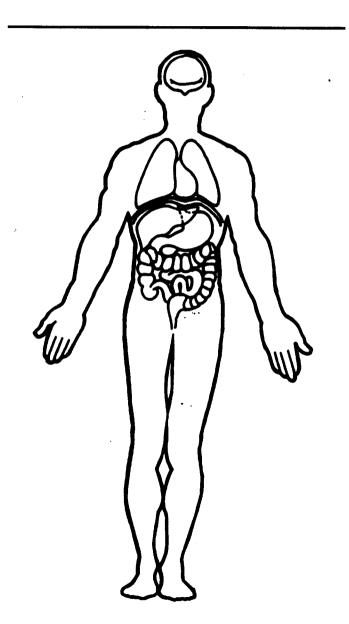


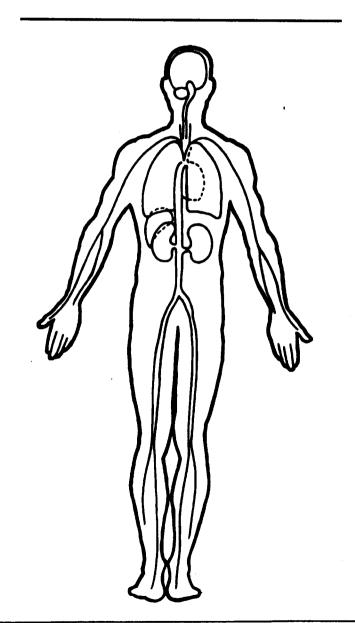


	OFFICIAL INJURY DATA — SKELETAL INJURIES
	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are
Blood Alcohol Level	navailable.)
BAL =	(bod)
Glasgow Coma Scale Score	
GCSS =	
Units of Blood Given	151800.2,2 151800.2,2 151800.2,2 151800.2,2 151800.2,2
Units =	15/800.2, 2/SW 15/800.2, 2/SW 15/800.2, 2/SW 15/800.2, 2/SW 15/800.2, 2/SW
Arterial Blood Gase	
pH = PO <sub>2</sub> =	
PCO <sub>2</sub>	
HCO,	
	851802.2,1 BRAKE

# OFFICIAL INJURY DATA —INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

			OC	CUPANT		DATA S	SUPPL	EMENT			
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
	_						_			-	
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					<del></del>	_					
	<u> </u>	_		<del></del>							



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum ABIT	10. Occupant's Seat Position/ 3
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u># Z</u>	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month):  (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant  Fourth Seat (41) Left side (42) Middle
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknowninches X 2.54 =centimeters	(43) Right side (44) Other (specify): (45) On or in the lap of another occupant  (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms  9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	11. Occupant's Posture (0) Normal posture  Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJEC	TION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown		15. Medium Status (Immediately Prior To Impact)  (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	4	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries
(0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):  (9) Unknown		<ul> <li>(2) Removed from vehicle due to injuries</li> <li>(3) Exited vehicle with some assistance</li> <li>(4) Exited vehicle under own power</li> <li>(5) Occupant fully ejected</li> <li>(9) Unknown</li> </ul>

		BELT SYS	TEM F	FUNCTION	
18.	Mai (0) (1)	nual (Active) Belt System Availability  None available  Belt removed/destroyed	£ 22	Shoulder Belt Upper Anchorage Adjustment     (0) No shoulder belt     (1) No upper anchorage adjustment for shoulder be	5
	(2)	Shoulder belt			ei(
	(4) (5)	Lap belt Lap and shoulder belt		Adjustable shoulder Belt Upper Anchorage (2) In full up position	
	(5)	Belt available—type unknown		(3) In mid position (4) In full down position	
	Inte	gral Belt Partially Destroyed		(5) Position unknown	
	(6) (7)	Shoulder belt (lap belt destroyed/removed) Lap belt (shoulder belt destroyed/removed)		(9) Unknown if position has adjustable upper anchorage adjustment	
	(8)	Other belt (specify):	23	•	ø
	(9)	Unknown	2	Function	<del></del>
19.	Mar	nual (Active) Belt System Use	_	(0) Not equipped/not available (1) 2 point automatic belts	
	(00)	None used, not available, or belt removed/destroyed		(2) 3 point automatic belts (3) Automatic belts - type unknown	
	(01)	Inoperative (specify):		Non-functional	
		Shoulder belt		(4) Automatic belts destroyed or rendered inoperative	
	(03)	Lap belt Lap and shoulder belt		(9) Unknown	
	(05)	Belt used—type unknown Other belt used (specify):	24	. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or	4
				rendered inoperative	
	(12) (13)	Shoulder belt used with child safety seat Lap belt used with child safety seat		Automatic belt in use     Automatic belt not in use (manually)	
	(14)	Lap and shoulder belt used with child	•	disconnected, motorized track inoperative) (specify):	
	(15)	safety seat Belt used with child safety seat—type unknown		(3) Automátic belt use unknown (9) Unknown	
	(18)	Other belt used with child safety seat (specify):	25	Automatic (Passive) Belt System Type	d.
	(99)	Unknown if belt used	20	(0) Not equipped/not available (1) Non-motorized system	<u> </u>
20.	Prop	per Use of Manual (Active) Belts	<u> </u>	(2) Motorized system	
	(0)	None used or not available Belt used properly		(9) Unknown	d
	(2)	Belt used properly with child safety seat	20	Belt System	<u>\$</u>
	Belt	Used Improperly		(0) Not equipped/not available/not used (1) Automatic belt used properly	
	(3) (4)	Shoulder belt worn under arm Shoulder belt worn behind back or seat		(2) Automatic belt used properlý with child safety seat	
	(5)	Belt worn around more than one person	i	Automatic Belt Used Improperly	
	(7)	Lap belt worn on abdomen Lap belt or lap and shoulder belt used		(3) Automatic shoulder belt worn under arm	
		improperly with child safety seat (specify):		<ul><li>(4) Automatic shoulder belt worn behind back</li><li>(5) Automatic belt worn around more than</li></ul>	
		Other improper use of manual belt system		one person (6) Lap portion of automatic belt worn	
		(specify):		on abdomen (7) Automatic lap and shoulder belt or	
	(9)	Unknown			
		ual (Active) Belt Failure Modes	_	automatic shoulder belt used improperly with child safety seat (specify):	
	(0)	ng Accident No manual belt used or not available		(8) Other improper use of automatic belt system	
	(1)	No manual belt failure(s) Torn webbing (stretched webbing not		(specify): (9) Unknown	
		included)		, ,	
	(3) (4)	Broken buckle or latchplate Upper anchorage separated	27.	. Automatic (Passive) Belt Failure Modes	4
	(5)	Other anchorage separated (specify):		(0) Not equipped/not available/not in use	
		Broken retractor		(1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated	
	(7)	Combination of above (specify):		(3) Broken buckle or latchplate (4) Upper anchorage separated	
	(8)	Other manual belt failure (specify):		(5) Other anchorage separated (specify):	
+	(9)	Unknown		(6) Broken retractor	•
				<ul><li>(7) Combination of above (specify):</li><li>(8) Other automatic belt failure (specify):</li></ul>	
				(9) Unknown	

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown"  29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use.  [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data * smrfmars [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	<ul> <li>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)</li> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)?  (0) Not equipped/not available (1) No previous accidents  Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of  Delta V For Air Bag  Deployment Impact (-000) Not equipped/not available  Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service  Been Performed On This Air Bag System?  (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify):  (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? 3  (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown  43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):  (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYS' EVALUATION continued	TEM	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify):  (03) Object carried by occupant, (specify):  (04) Adaptive/assistive controls, (specify):  (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify):	96	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown
<b>45</b> .	(95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown  Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	3	<ul> <li>(00) Occupant not seated or no seat</li> <li>(01) Bucket</li> <li>(02) Bucket with folding back</li> <li>(03) Bench</li> <li>(04) Bench with separate back cushions</li> <li>(05) Bench with folding back(s)</li> <li>(06) Split bench with separate back cushions</li> <li>(07) Split bench with folding back(s)</li> <li>(08) Pedestal (i.e., column supported)</li> <li>(09) Box mounted seat (i.e., van type)</li> <li>(10) Other seat type (specify):</li> </ul>
46.	<ul> <li>(3) Deployed, unknown if tethered</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> <li>Did The Air Bag Have Vent Ports?</li> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify number of vent ports):</li> <li>(3) Deployed, unknown if vent ports present</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>	_3	(99) Unknown  51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify): (9) Unknown  52. Seat Track Adjusted Position Prior To Impact
	Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if other occupant con air bag (7) Not deployed (8) Unknown if deployed (9) Unknown		<ul> <li>(0) Occupant not seated or no seat</li> <li>(1) Non-adjustable seat track</li> <li>Adjustable Seat Track</li> <li>(2) Seat at forward most track position</li> <li>(3) Seat between forward most and middle track positions</li> <li>(4) Seat at middle track position</li> <li>(5) Seat between middle and rear most track positions</li> <li>(6) Seat at rear most track position</li> <li>(9) Unknown</li> </ul>
	Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	4	

### HEAD RESTRAINT AND SEAT EVALUATION continued

9

- 53. Seat Back Incline Prior and Post Impact
  - (00) Occupant not seated or no seat
  - (01) Not adjustable

#### Upright prior to impact

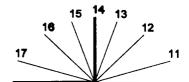
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

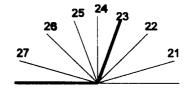
#### Slightly reclined prior to impact

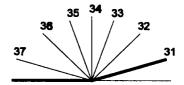
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

#### Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
  - (0) Occupant not seated or no seat
  - (1) No seat performance failure(s)
  - (2) Seat adjusters failed
  - (3) Seat back folding locks or "seat back" failed (specify):
  - (4) Seat track/anchors failed
  - (5) Deformed by impact of occupant
  - (6) Deformed by passenger compartment intrusion, (specify):
  - (7) Combination of above (specify):
  - (8) Other (specify): \_
  - (9) Unknown







	CI	HILD SAI	FETY SEAT
55.	Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CD Data Collection, Coding and Editing (950) Built-in child safety seat		58. Child Safety Seat Harness Usage  9 9 59. Child Safety Seat Shield Usage
56.	(997) Other make/model (specify):  (998) Unknown make/model (999) Unknown if child safety seat used  Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify):	_ <b>_</b>	Note: Options below applicable to Variables OA58-OA60. (00) No child safety seat  Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used
<b>57</b> .	(9) Unknown if child safety seat used  Child Safety Seat Orientation (00) No child safety seat  Designed for Rear Facing for This Age/Weigh (01) Rear facing (02) Forward facing (08) Other orientation (specify):	<u>ф</u> <u>ф</u>	Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used  Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used
	Oesigned For Forward Facing for This Age/M (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation  Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used	 Veight 	(99) Unknown if child safety seat used

		-9-
INJURY CONSEQUENCES		
61. Injury Severity (Police Rating)  (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):   Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown  64. Hospital Stay (00) Not HospitalizedCode the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days LostCode the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	9_
STOP W	ORK HERE	

**VARIABLES 66-74** 

INJURY CONSEQUENCES	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60)  (00) Not fatal  (96) Fatal - ruled disease  (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death <u>6 5</u>	72. Was the Occupant Given Blood?  (1) No - blood not given
68. 2nd Medically Reported Cause of Death 4 2	(2) Yes - blood given (specify units):(9) Unknown if blood given
69. 3rd Medically Reported Cause of DeathCode the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  (97) Other result (includes fatal ruled	73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown (97) Injured, details unknown (99) Unknown if injured
disease) (specify):	BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant  Code the actual number of injuries recorded for this occupant.  (00) No recorded injuries  (97) Injured, details unknown  (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

BEST AVAILABLE

Form Approved

O.M.B. No. 2127-0021

**National Highway Traffic Safety** Administration

2. Case Number - Stratum

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

- 1. Primary Sampling Unit Number
- 3. Vehicle Number 17

AB

4. Occupant Number

Ø 2

# **INJURY DATA**

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				A.I.S 9	0			**	Injury	Occupant
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Confidence In	Direct/ Area Indirect Intrusion Injury Number
1st	5. <u> </u>	6. <u>/</u>	7. <u>4</u> a	<u> </u>	9. <u>54</u>	10	11. <u>6</u> 12.	180	1314_	<u>/</u> 15, <u>\$\$</u>
2nd	16	17. 6	18. 5 19	<u> </u>	20. <u>4. 7</u>	21. <u>-</u> 2	26 21.	150	24 <u>-2</u> 25.	<u>Z 26. ø q</u>
3rd	27 <u> </u>	28	29. <u>4</u> 30	<u> 4</u>	31. <u>Ø 2</u>	32 <u>3</u>	33 <u>6</u> 34.	180	35 <u>2</u> 36.	<u>/</u> 37. <u>ØØ</u>
<b>4t</b> h	38. <u> </u>	39. <u>/</u>	40. <u>4</u> 41	<u> </u>	42.66	43.3	44_6 45.	<u> 18                                   </u>	46. Z- 47.	<u>/</u> 48. Ø Ø
5th	49	50. <u>/</u>	51. <u> </u>	<u> </u>	53. <u>4.4</u>	54. <u>3</u>	55. <u>2</u> 58.	180	57. <u> </u>	<u>/</u> 59. <u>44</u>
6th	60. <u>/</u>	<sub>61.</sub> <u>7</u>	62 <u>-5</u> 63	28	64. <u> </u>	65	66Z 67.	<u>ø / 2</u>	68. <u>Z</u> 69.	<u>/</u> 76. <u>ø/</u>
7th	71. <u>/</u>	72. <u>Z</u>	73 <u>9</u> 74	<u>72</u>	75. <u>Ø 2</u>	76. <u>/</u>	77 78	180	79. <u> </u>	<u>/</u> 81. <u>Ø ∮</u>
8th	82	83, <u>Z</u>	84. <u>9</u> .85	<u> </u>	86. <u>Ø 2</u>	<b>67</b> . <u>/</u>	88 89.	697	90. <u>9</u> 91.	7 82 <u>4 4</u>
9th	93. <u>                                    </u>	94. <u>2</u>	95. <u>9</u> 96.	72	97. <u>Ø Z</u>	98. <u>/</u>	99. / 100.	<u>18                                    </u>	101. <u>/</u> 102.	/ 103. <u>w q</u>
10th	104. <u>/</u>	105. <u>Z</u> 1	06. <u>9</u> 107.	<u>d 4</u> 1	108. <u>4 2</u>	109/	110 111.	697	112 <u>9</u> 113.	7 114 Ø &

				OCC	UPANT	NJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th	<u></u>	2	<u>9</u>	<u> </u>	42	<u></u>	<u></u>	180	_		<u>ø4</u>
12th	<u> 1</u>	3	9	42	42		<u>′</u>	152	<u> </u>	<u></u>	<u> </u>
13th	<u>1</u>	<u> 7</u>	9	<u> </u>	<u>42</u>		<u>!</u>	6/2	<u>2</u>	<u> </u>	41_
140	<u></u>	7	9	<u> </u>	<u> 42</u>		<u>/</u>	180	2		<u> </u>
15ih	<u>1</u>	8	9_	<u>04</u>	<u> </u>		<u>/</u>	697	<u>9</u>	<u>7</u>	<u> </u>
16th		8	9	42	92			697	9	<u> </u>	<u> </u>
17th		8	9_	<u> 4</u> 4	42	1		4/2	2		<u>ø/</u>
18th	<u>1</u>	8	9	<u> </u>	92	<u></u>	<u> 2</u>	912	<u> </u>	<u></u>	<u>ø/</u>
19 <b>i</b> n	1	<u>8</u>	9_	04	<u> 42</u>	<u>/</u>	<u> 2</u>	412	2	<u></u>	<u>4/</u>
20th	1	8	<u>9</u>	42	42	_′	2	912	2	<u>′</u>	<u>q 1</u>
21 <b>s</b> i	<u>. L</u>	<u>5</u>	<u>9</u>	92	42			152	2		<u> </u>
22nd	1	<u> </u>	<u>9</u>	62	42	<u>'</u>	<u></u>	152	<u>, 2</u>	<u>/</u>	<u> </u>
23rd	<u>_1</u>	<u>5</u>	<u>1</u>	42	42			18 #	<u>3</u>		99
2401		5	<u>9</u>	<u> </u>	<u> </u>			<u> 180</u>	<u>3</u>	<u>/</u>	<u>øø</u>
25th		_5	2	<u> 44</u>	<u>#2</u>			697	<u>9</u>	7	<u>ØØ</u>

National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

OCCUPANT INJURY DATA SUPPLEMENT											
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
3	/	2	9	φ <sub>2</sub>	<u>#2</u>		8	180			UP
<u>21</u>		<u>2</u>	9	42	42	<u>′</u>	2	184			<u>*</u> @
28		2	9	42	42	<u>/</u>	<u>4</u>	180			<u> </u>
24	1	2	9	<u>\$</u> 4	42		<u>2</u> —	18 0	3		<u> </u>
<u>w</u>		<u>2</u>	9	<u> </u>	42		7	184	2		<u> </u>
31		_Z 	9	42	42		7	18 9			<u> </u>
32	1	5	9	44	42	<u>′</u>	8	<u>151</u>	<u>3</u>	_′	<u> </u>
33	1	<u>8</u>	9	<u> </u>	<u> </u>		<u>2</u>	<u> 151</u>	<u>3</u>	_/	<u> </u>
34		_8	9	42	42			151	3		<u> </u>
35	<u>/</u>	_7	9	44	42		<u>2</u>	4/2	_2	_/	<u>4/</u>
_	_						_		<del></del>		
			_						_	<del></del>	<del></del>
	<u>.</u>		_				<u> </u>				
		_	_							_	
										_	

#### OCCUPANT INJURY CLASSIFICATION

# **Body Region** Head (2) (3) (4) (5) (6) (7) (8) Face Neck

- Thorax Abdomen
- Spine
- Upper Extremity Lower Extremity
- Unspecified

#### **Type of Anatomic** Structure

- Whole Area
- Vessels
- **Nerves**
- (2) (3) (4) Organs (includes Muscles/ligaments)
- (5) Skeletal (includes ioints)
- Head LOC
- (9) Skin

#### **Specific Anatomic** Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

#### Whole Area (02) Skin - Abrasion (04)Skin - Contusion (06) Skin - Laceration Skin - Avulsion (08)(10) **Amoutation**

- (20) Burn (30)Crush
- (40)Degloving (50) Injury - NFS
- Trauma, other than (90) mechanical

#### Head - LOC (02) Length of LOC

- (04) Level (06) of
- (80) Consciousness
- (10) Concussion

# Spine

- Cervical (02)
- Thoracic (04)(06)
  - Lumbar

#### Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

### **Abbreviated Injury Scale**

- Minor Injury
- Moderate Injury
- (2) (3) Serious Injury
- Severe Injury Critical Injury
- (5) (6) Maximum (untreatable)
- (7) Injured, unknown severity

#### Aspect

- Right
- (2) (3) Left Bilateral
- Central
- (5) Anterior (6) **Posterior**
- (7)Superior
- (8)Inferior
- (9) Unknown
- (0) Whole region

# SOURCE OF INJURY DATA

# **INJURY SOURCE** CONFIDENCE LEVEL

(3) Possible

(9) Unknown

- OFFICIAL RECORDS (1) Autopsy records with or (1) Certain without hospital/medical (2) Probable
- records (2) Hospital/medical records other
- than emergency room (e.g., discharge summary) (3) Emergency room records only
- (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

### **UNOFFICIAL RECORDS**

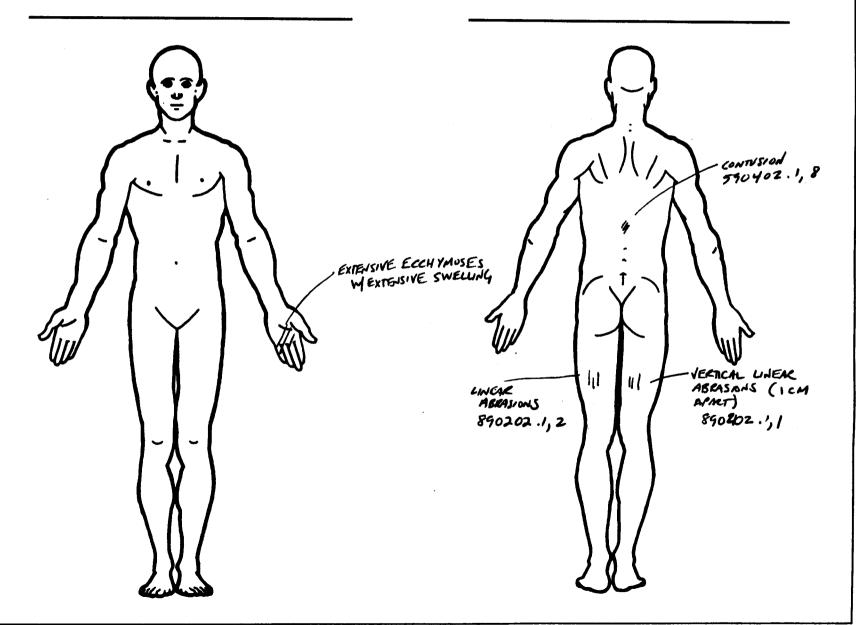
- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

#### DIRECT/INDIRECT INJURY

- Direct contact injury
- (2) Indirect contact injury
  - Noncontact injury
- Injured, unknown source

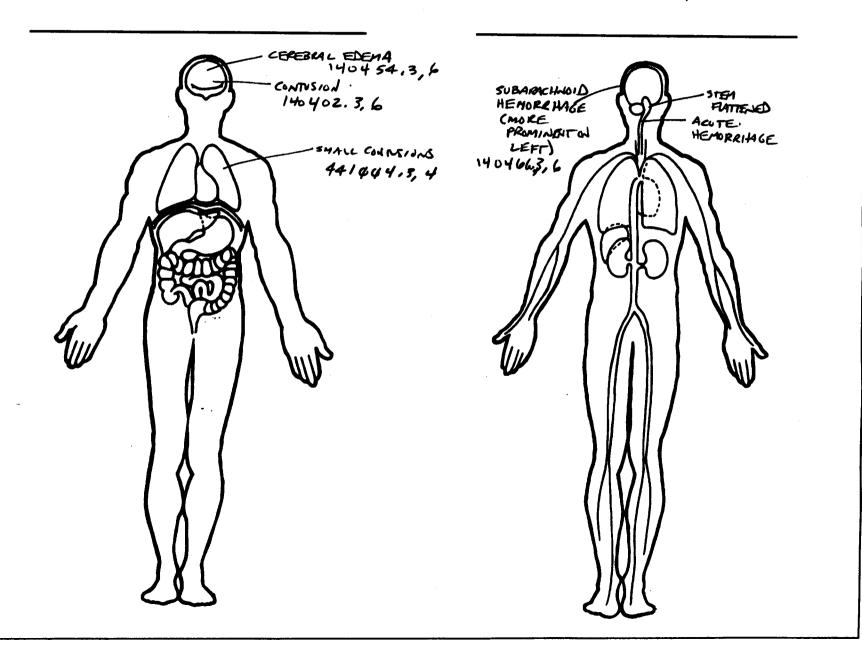
FRON	NT	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest (used
(001)	Windshield		armrest		object held		behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	Air bag compartment	EXTE	RIOR of OCCUPANT'S
(00T)	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	CLE
(007)	Steering column, transmission	(108)	Right side window sill		eyewear	(451)	
	selector lever, other	(109)	Right side window glass	(187)	•	(452)	Outside hardware (e.g.,
(800)	attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
` <i>'</i>	Cellular telephone or CB radio		following: frame, window sill,	*****	jewelry	(453)	Other exterior surface or tires
(009)	Add on equipment (e.g., tape		A (A1/A2)-pillar, B-pillar, or	(188)	•		(specify):
(040)	deck, air conditioner)	(4.4.6)	roof side rail.		cover-passenger side and		
(010)	Left instrument panel and	(110)			object held	(454)	Unknown exterior objects
(04.45	below		(specify):	(189)	• •		
(011)	Center instrument panel and				cover-passenger side and		RIOR OF OTHER MOTOR
(042)	below	4			object in mouth	VEHIC	- <del>-</del>
(012)	Right instrument panel and	INTER		(190)	Other air bag (specify)		Front bumper
(042)	below		Seat, back support			(502)	Hood edge
(013)	Glove compartment door	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(503)	Other front of vehicle
(014)	Knee bolster	(153)	•		cover (specify)		(specify):
(015)	Windshield including one or		frame attachment point				
	more of the following: front	(154)	· · · · · · · · · · · · · · · · · · ·			(504)	Hood
	header, A (A1/A2)-pillar,		component (specify):	ROOF	•	(505)	Hood ornament
	instrument panel, mirror, or			(201)	Front header	(506)	Windshield, roof rail, A-pillar
	steering assembly (driver side	(155)		(202)	Rear header	(507)	Side surface
	only)	(160)	Other occupants (specify):	(203)	Roof left side rail	(508)	Side mirrors
(016)	Windshield including one or			(204)	Roof right side rail	(509)	Other side protrusions
	more of the following: front	(161)	Interior loose objects	(205)	Roof or convertible top		(specify):
	header, A (A1/A2)-pillar,	(162)	Child safety seat (specify):				
	instrument panel, or mirror			FLOO	R	(510)	Rear surface
	(passenger side only)	(163)	Other interior object (specify):	(251)	Floor (including toe pan)	(511)	Undercarriage
(017)	Windshield reinforced by			(252)	Floor or console mounted	(512)	Tires and wheels
	exterior object (specify)				transmission lever, including	(513)	Other exterior of other motor
		AIR B	AG .		console		vehicle (specify):
(019)	Other front object (specify):	(170)	Air bag-driver side	(253)	Parking brake handle		
		(171)	Air bag-driver side and	(254)	Foot controls including	(514)	Unknown exterior of other
			e <del>yewe</del> ar		parking brake		motor vehicle
LEFT S	SIDE	(172)	Air bag-driver side and jewelry				
(051)	Left side interior surface,	(173)	Air bag-driver side and object	REAR		OTHE	R VEHICLE OR OBJECT IN
	excluding hardware or		heid	(301)	Backlight (rear window)	THE E	NVIRONMENT
	armrests	(174)	Air bag-driver side and object	(302)	Backlight storage rack,	(551)	Ground
(052)	Left side hardware or armrest		in mouth		door, etc.	(598)	Other vehicle or object
(053)	Left A (A1/A2)-pillar	(175)	Air bag compartment	(303)	Other rear object (specify):	, ,	(specify):
(054)	Left B-pillar		Anna dalina atala				
(004)	con o pinar		cover-driver side				
	·	(176)	Air bag compartment			(599)	Unknown vehicle or object
	Other left pillar (specify):	(176)	Air bag compartment	ADAP'	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
055)	·	` ,	Air bag compartment cover-driver side and eyewear		TIVE (ASSISTIVE) DRIVING	, ,	·
055) 056)	Other left pillar (specify):	` ,	Air bag compartment cover-driver side and eyewear Air bag compartment	EQUIP	MENT	NONC	ONTACT INJURY
(055) (056) (057)	Other left pillar (specify):  Left side window glass	(177)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry	EQUIP	MENT Hand controls for	NONC (601)	CONTACT INJURY Fire in vehicle
055) 056) 057) 058)	Other left pillar (specify):  Left side window glass  Left side window frame  Left side window sill	(177)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment	EQUIF (401)	MENT Hand controls for braking/acceleration	NONC (601) (602)	CONTACT INJURY  Fire in vehicle  Flying glass
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass  Left side window frame  Left side window sill  Left side window glass	(177)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object	EQUIP	MENT Hand controls for braking/acceleration Steering control devices	NONC (601)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury
055) 056) 057) 058) 059)	Other left pillar (specify):  Left side window glass  Left side window frame  Left side window sill  Left side window glass including one or more of the	(177) (178)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held	EQUIF (401)	MENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering	NONC (601) (602)	CONTACT INJURY Fire in vehicle Flying glass Other noncontact injury source
055) 056) 057) 058) 059)	Other left pillar (specify):  Left side window glass  Left side window frame  Left side window sill  Left side window glass including one or more of the following: frame, window sill,	(177)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment	(401)	MENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel)	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source (specify):
055) 056) 057) 058) 059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or	(177) (178)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in	EQUIF (401)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
055) 056) 057) 058) 059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.	(177) (178) (179)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth	(401) (402) (403)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source (specify):
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object	(177) (178) (179)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side	(401)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.	(177) (178) (179)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and	(401) (402) (403) (405)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter)	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object	(177) (178) (179) (180) (181)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear	(401) (402) (403) (405) (406)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (specify):	(177) (178) (179)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear Air bag-passenger side and	(401) (402) (403) (405) (406) (407)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls Wheelchair tie-downs	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (specify):	(177) (178) (179) (180) (181)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear	(401) (402) (403) (405) (406)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls Wheelchair tie-downs Modification to seat belts,	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059) (060)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (specify):  SIDE Right side interior surface,	(177) (178) (179) (180) (181)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear Air bag-passenger side and	(401) (402) (403) (405) (406) (407) (408)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls Wheelchair tie-downs Modification to seat belts, (specify):	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059) (060)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (specify):  SIDE Right side interior surface, excluding hardware or	(177) (178) (179) (180) (181)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear Air bag-passenger side and	(401) (402) (403) (405) (406) (407)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls Wheelchair tie-downs Modification to seat belts, (specify): Additional or relocated	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases
(055) (056) (057) (058) (059) (060)	Other left pillar (specify):  Left side window glass Left side window frame Left side window sill Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail. Other left side object (specify):  SIDE Right side interior surface,	(177) (178) (179) (180) (181)	Air bag compartment cover-driver side and eyewear Air bag compartment cover-driver side and jewelry Air bag compartment cover-driver side and object held Air bag compartment cover-driver side and object in mouth Air bag-passenger side Air bag-passenger side and eyewear Air bag-passenger side and	(401) (402) (403) (405) (406) (407) (408)	HENT Hand controls for braking/acceleration Steering control devices (attached to OEM steering wheel) Steering knob attached to steering wheel Replacement steering wheel (i.e., reduced diameter) Joy stick steering controls Wheelchair tie-downs Modification to seat belts, (specify):	NONC (601) (602) (603)	CONTACT INJURY  Fire in vehicle  Flying glass  Other noncontact injury  source  (specify):  Air bag exhaust gases

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



	OFFICIAL INJURY DATA — SKELETAL INJURIES
Restrained?	
	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are
Yes	navailable.)
Blood Alcohol Leve (mg/dl) BAL =	ATLANTO - OCCIPITAL DISLOCATION
Glasgow Coma Scale Score GCSS =	650208.2,6
Units of Blood Given Units =	FX EADIUS 152802.2, 2
Arterial Blood Gase  pH =  PO <sub>2</sub> =	
PCO <sub>2</sub>	

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



petechiae /pētē'kēē/sing. petechia /-ə/ tiny purple or red spots that appear on the skin because of small spots of bleeding under the skin. Petechiae range from pinpoint to pinhead size and are even with the skin surface. Compare ecchymosis.-petechial, adj.

diastasis /dī-as'təsis/ the separation of two body parts that normally are joined together, as the separation of parts of a bone.

atlantooccipital joint /-oksip'itel/ one of a pair of joints formed where the atlas of the vertebral column meets the occipital bone of the skull.



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB 17	10. Occupant's Seat Position 2 /
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u>4 3</u>	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age	·
Code actual age at time of accident. (00) Less than one year old (specify by month):	Second Seat (21) Left side
	(22) Middle (23) Right side
(97) 97 years and older (99) Unknown	(24) Other (specify):
(99) Olikilowii	(25) On or in the lap of another occupant
6. Occupant's Sex	Third Seat
(1) Male	(31) Left side (32) Middle
(2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month)	(33) Right side
(4) Female-pregnant-2nd trimester(4th-6th month)	(34) Other (specify):
(5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown	(35) On or in the lap of another occupant
(9) Unknown	Fourth Seat
	(41) Left side (42) Middle
	(43) Right side
7. Occupant's Height999	(44) Other (specify):
Code actual height to the nearest	(45) On or in the lap of another occupant
centimeter. (999) Unknown	(97) In or on unenclosed area
(coo, common,	(98) Other seat (specify):
inches X 2.54 = centimeters	(99) Unknown
8. Occupant's Weight <u>9 9 9</u>	
Code actual weight to the nearest	11. Occupant's Posture
kilogram. (999) Unknown	(0) Normal posture
pounds X .4536 = kilograms	Abnormal posture (1) Kneeling or standing on seat
pounds \ .4550 Rilograms	(2) Lying on or across seat
9. Occupant's Role 2	(3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another
(1) Driver (2) Passenger	occupant or to look out a rear window
(9) Unknown	(5) Sitting on a console (6) Lying back in a reclined seat position
	(7) Bracing with feet or hands on a surface in front of
	seat (8) Other abnormal posture (specify):
	(9) Unknown
	(c) Sincioni

EJECTION/ENTRAPMENT		
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	<u></u>	<ul> <li>15. Medium Status (Immediately Prior To Impact)</li></ul>
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	<u> </u>	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle
14. Ejection Medium  (0) No ejection  (1) Door/hatch/tailgate  (2) Nonfixed roof structure  (3) Fixed glazing  (4) Nonfixed glazing (specify):  (5) Integral structure  (8) Other medium (specify):  (9) Unknown	<u>.</u> 4	<ul> <li>(1) Removed from vehicle while unconscious or disoriented</li> <li>(2) Removed from vehicle due to injuries</li> <li>(3) Exited vehicle with some assistance</li> <li>(4) Exited vehicle under own power</li> <li>(5) Occupant fully ejected</li> <li>(9) Unknown</li> </ul>

BELT SYSTEM FUNCTION				
18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt  Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position			
Integral Belt Partially Destroyed  (6) Shoulder belt (lap belt destroyed/removed)  (7) Lap belt (shoulder belt destroyed/removed)  (8) Other belt (specify):  (9) Unknown  19. Manual (Active) Belt System Use	(5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment  23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts			
(00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):  (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	(2) 3 point automatic belts (3) Automatic belts - type unknown  Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown  24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or			
<ul> <li>(12) Shoulder belt used with child safety seat</li> <li>(13) Lap belt used with child safety seat</li> <li>(14) Lap and shoulder belt used with child safety seat</li> <li>(15) Belt used with child safety seat—type unknown</li> <li>(18) Other belt used with child safety seat</li> <li>(specify):</li></ul>	rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown  25. Automatic (Passive) Belt System Type (0) Not equipped/not available			
20. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat  Belt Used Improperly	(1) Non-motorized system (2) Motorized system (9) Unknown  26. Proper Use of Automatic (Passive)  Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly			
<ul> <li>(3) Shoulder belt worn under arm</li> <li>(4) Shoulder belt worn behind back or seat</li> <li>(5) Belt worn around more than one person</li> <li>(6) Lap belt worn on abdomen</li> <li>(7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):</li> <li>(8) Other improper use of manual belt system (specify):</li> </ul>	(2) Automatic belt used properly with child safety seat  Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or			
(9) Unknown  21. Manual (Active) Belt Failure Modes     During Accident     (0) No manual belt used or not available     (1) No manual belt failure(s)     (2) Torn webbing (stretched webbing not	automatic shoulder belt used improperly with child safety seat (specify):  (8) Other improper use of automatic belt system (specify):  (9) Unknown			
included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify): (9) Unknown	27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):			

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown"  29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	<ul> <li>31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown</li> </ul>
Check the Primary Source Used In Determining Belt Use.  [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	<ul> <li>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)</li> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
<ul> <li>35. Had Vehicle Been in Previous Accident(s)? <ul> <li>(0) Not equipped/not available</li> <li>(1) No previous accidents</li> </ul> </li> <li>Yes <ul> <li>(2) Previous accident(s) without deployment(s)</li> <li>(3) One previous accident with deployment</li> <li>(4) More than one previous accident with at least one deployment</li> <li>(8) Previous accidents, unknown deployment status</li> <li>(9) Unknown</li> </ul> </li> </ul>	40. Longitudinal Component of  Delta V For Air Bag  Deployment Impact (-000) Not equipped/not available  Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?  (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
<ul> <li>37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System?  (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify):  (9) Unknown</li> <li>38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number</li> </ul>	42. Were Air Bag Module Cover Flap(s) Damaged?   (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed (9) Unknown  43. Was There Damage To The Air Bag?    4
that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):  (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEA	EAD RESTRAINT AND SEAT EVALUATION
	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify): (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed	50. \$	Head Restraint Type/Damage by Occupant at This Occupant Position  (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown  Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions
45.	(99) Unknown  Was The Air Bag Tethered?  (0) Not equipped/not available  (1) No  (2) Yes (specify number of tether straps):		<ul> <li>(05) Bench with folding back(s)</li> <li>(06) Split bench with separate back cushions</li> <li>(07) Split bench with folding back(s)</li> <li>(08) Pedestal (i.e., column supported)</li> <li>(09) Box mounted seat (i.e., van type)</li> <li>(10) Other seat type (specify):</li> </ul>
46. [	3) Deployed, unknown if tethered 7) Not deployed 8) Unknown if deployed 9) Unknown Did The Air Bag Have Vent Ports?  (0) Not equipped/not available 1) No 2) Yes (specify number of vent ports):	51. \$ ( (	(99) Unknown  Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
(	3) Deployed, unknown if vent ports present 7) Not deployed 8) Unknown if deployed 9) Unknown	52. S	(9) Unknown  Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track
(	Nas the Air Bag in this Occupant's Position Contacted by Another Occupant?  Not equipped/not available  No  Yes (specify):  Deployed, unknown if other occupant contact to air bag  Not deployed  Unknown if deployed  Unknown	(	Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
()	Nas This Occupant Wearing Eye-wear?  O) Not equipped/not available  1) No  2) Eyeglasses/sunglasses  3) Contact lenses  4) Deployed, unknown if eyewear worn  7) Not deployed  8) Unknown if deployed  9) Unknown		

### HEAD RESTRAINT AND SEAT EVALUATION continued

5

- 53. Seat Back Incline Prior and Post Impact
  - (00) Occupant not seated or no seat
  - (01) Not adjustable

### Upright prior to impact

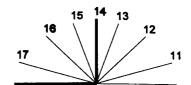
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

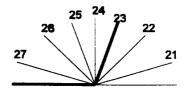
### Slightly reclined prior to impact

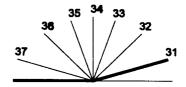
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

### Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
  - (0) Occupant not seated or no seat
  - (1) No seat performance failure(s)
  - (2) Seat adjusters failed
  - (3) Seat back folding locks or "seat back" failed (specify):
  - (4) Seat track/anchors failed
  - (5) Deformed by impact of occupant
  - (6) Deformed by passenger compartment intrusion, (specify):
  - (7) Combination of above (specify):
  - (8) Other (specify):
  - (9) Unknown







		CHIL	D SAF	ETY	/ SE	TA		
	Child Safety Seat Make/Model (000) No child safety seat	75	<b>#</b>	58.	Child	Safety Seat Harness Usage		2_
	Applicable codes are found in your NASS (Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	CDS		59.	Child	Safety Seat Shield Usage	<u> </u>	3
	(998) Unknown make/model			60.	Child	Safety Seat Tether Usage		3_
	(999) Unknown if child safety seat used					Options below applicable to bles OA58-OA60.		
	Type of Child Safety Seat  (0) No child safety seat  (1) Infant seat  (2) Toddler seat  (3) Convertible seat  (4) Booster seat - with shield  (5) Booster seat - without shield  (7) Other type child safety seat (specify):  (8) Unknown child safety seat used		2		(00) Not E (01) (02) (03)	No child safety seat  Pesigned With Harness/Shield/Tether After market harness/shield/tether added, not used After market harness/shield/tether us Child safety seat used, but no after m harness/shield/tether added Unknown if harness/shield/tether added or used		
57. (	Child Safety Seat Orientation  OO) No child safety seat	φ.	2_		(11) (12)	ned With Harness/Shield/Tether Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether use	d	
	Designed for Rear Facing for This Age/We (01) Rear facing (02) Forward facing (08) Other orientation (specify):  Unknown orientation  Designed For Forward Facing for This Age (11) Rear facing (12) Forward facing (13) Other orientation (specify):  Unknown orientation  Unknown Design or Orientation For This age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify):  Unknown orientation (specify):  Unknown orientation (specify):  Unknown orientation		ht		(21) (22) (29)	own if Designed With Hamess/Shield, Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether use Unknown if child safety seat used		∍ <b>r</b>

INJURY CONSEQUENCES		
<ul> <li>61. Injury Severity (Police Rating)</li> <li>(0) O - No injury</li> <li>(1) C - Possible injury</li> <li>(2) B - Nonincapacitating injury</li> <li>(3) A - Incapacitating injury</li> <li>(4) K - Killed</li> <li>(5) U - Injury, severity unknown</li> <li>(6) Died prior to accident</li> <li>(9) Unknown</li> </ul>	 63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):	<u> </u>
62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):  Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown treated (9) Unknown	 64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60 that the occupant stayed in hospital. (61) 61 days or more (99) Unknown	9 ) 7
e T	DV UEDE	

**VARIABLES 66-74** 

INJURY CONSEQUENCES	TRAUMA DATA
66. Time to Death  Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60)  (00) Not fatal  (96) Fatal - ruled disease  (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death  4 9 68. 2nd Medically Reported Cause of Death	(2) Yes - blood given (specify units):
69. 3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  (97) Other result (includes fatal ruled	(9) Unknown if blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (00) Not injured  (01) Injured, ABGs not measured or reported  (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown  (97) Injured, details unknown  (99) Unknown if injured
disease) (specify):	BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



National Highway Traffic Safety NATIONAL ACCIDENT SAMPLING SYSTEM dministration CRASHWORTHINESS DATA SYSTEM OCCUPANT'S SEATING 1. Primary Sampling Unit Number AB 17 2. Case Number - Stratum 10. Occupant's Seat Position Front Seat 3. Vehicle Number (11) Left side (12) Middle 4. Occupant Number (13) Right side OCCUPANT'S CHARACTERISTICS (14) Other (specify): (15) On or in the lap of another occupant **4** 1 5. Occupant's Age Second Seat Code actual age at time of accident. (21) Left side (00) Less than one year old (specify by month): (22) Middle (23) Right side (97) 97 years and older (24) Other (specify):\_\_ (99) Unknown (25) On or in the lap of another occupant Third Seat 6. Occupant's Sex (31) Left side (1) Male (32) Middle (2) Female-not reported pregnant (33) Right side (3) Female-pregnant-1st trimester(1st-3rd month) (34) Other (specify): (4) Female-pregnant-2nd trimester(4th-6th month) (35) On or in the lap of another occupant (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown Fourth Seat (9) Unknown (41) Left side (42) Middle (43) Right side (44) Other (specify): 7. Occupant's Height (45) On or in the lap of another occupant Code actual height to the nearest centimeter. (97) In or on unenclosed area (999) Unknown (98) Other seat (specify): (99) Unknown inches X 2.54 = \_\_\_\_ centimeters 9 8. Occupant's Weight Code actual weight to the nearest 9 11. Occupant's Posture kilogram. (0) Normal posture (999) Unknown Abnormal posture \_\_\_ pounds X .4536 = kilograms (1) Kneeling or standing on seat Lying on or across seat (3) Kneeling, standing or sitting in front of seat 9. Occupant's Role (4) Sitting sideways or turned to talk with another (1) Driver occupant or to look out a rear window (2) Passenger Sitting on a console (9) Unknown (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of (8) Other abnormal posture (specify): (9) Unknown

EJE	CTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	φ	15. Medium Status (Immediately Prior To Impact)  (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
(0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown  14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):	<b>4</b>	(0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

		BELT SYST	EM FUNCTION	
18	(0) (1)	anual (Active) Belt System Availability  None available  Belt removed/destroyed	Shoulder Belt Upper Anchorage Adjustment     (0) No shoulder belt     (1) No upper anchorage adjustment for shoulder belt	 belt
	(3)	Shoulder belt Lap belt	Adjustable shoulder Belt Upper Anchorage	
	(4) (5)	) Lap and shoulder belt ) Belt available—type unknown	(2) In full up position (3) In mid position (4) In full down position	
	Int (6)	egral Belt Partially Destroyed Shoulder belt (lap belt destroyed/removed)	(4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper	
	(6) (7) (8)	Lap belt (shoulder belt destroyed/removed)	anchorage adjustment	
	(9)		1 Eurotian	<b>\$</b>
19	. Ma	anual (Active) Belt System Use  O) None used, not available, or belt	(0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts	
		removed/destroyed  I) Inoperative (specify):	(2) 3 point automatic belts (3) Automatic belts - type unknown	
	(02		Non-functional (4) Automatic belts destroyed or rendered inoperative	
	(04	Lap belt Lap and shoulder belt	(9) Unknown	d
	(05	Shoulder beit Lap beit Lap and shoulder beit Beit used—type unknown Other beit used (specify):	24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative	4
	(12 (13	Shoulder belt used with child safety seat Lap belt used with child safety seat	(1) Automatic belt in use (2) Automatic belt not in use (manually	
	(14	<ul> <li>Lap and shoulder belt used with child safety seat</li> </ul>	disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	·
	(15 (18	Other belt used with child safety seat		
	(99	(specify): ) Unknown if belt used	25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system	4
20.	Pro (0)	oper Use of Manual (Active) Belts  None used or not available	(2) Motorized system (9) Unknown	
	$\binom{1}{2}$		Belt System	4
		t Used Improperly Shoulder belt worn under arm	(0) Not equipped/not available/not used (1) Automatic belt used properly	
	(4)	Shoulder belt worn behind back or seat Belt worn around more than one person	(2) Automatic belt used properlý with child safety seat	
	(6) (7)	Lap belt worn on abdomen Lap belt or lap and shoulder belt used	Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm	
		improperly with child safety seat (specify):	(4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than	
	(8)	Other improper use of manual belt system (specify):	one person (6) Lap portion of automatic belt worn on abdomen	
	(9)	Unknown	(7) Automatic lap and shoulder belt or	
	Duri	nual (Active) Belt Failure Modes 9	automatic shoulder belt used improperly with child safety seat (specify):	
	(1)	No manual belt used or not available No manual belt failure(s)	(8) Other improper use of automatic belt system (specify):	
		Torn webbing (stretched webbing not included) Broken buckle or latchplate	(9) Unknown	
	(4)	Upper anchorage separated Other anchorage separated (specify):	During Accident	<u>\$</u> _
	(6)	Broken retractor	<ul> <li>(0) Not equipped/not available/not in use</li> <li>(1) No automatic belt failure(s)</li> <li>(2) Torn webbing (stretched webbing not included)</li> </ul>	
			<ul> <li>(2) Torn webbing (stretched webbing not included)</li> <li>(3) Broken buckle or latchplate</li> <li>(4) Upper anchorage separated</li> <li>(5) Other anchorage separated (specify):</li> </ul>	
		Other manual belt failure (specify): Unknown		
	·-/		<ul><li>(6) Broken retractor</li><li>(7) Combination of above (specify):</li><li>(8) Other automatic belt failure (specify):</li></ul>	
			(9) Unknown	

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
<ul> <li>(9) Police indicated "unknown"</li> <li>29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"</li> </ul>	<ul> <li>31. Frontal Air Bag System Deployment (This Occupant Position)</li> <li>(0) Not equipped/not available</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
Check the Primary Source Used In Determining Belt Use.  [ ] Not equipped/not available/destroyed or rendered inoperative [ ] Vehicle inspection [ ] Official injury data [ ] Driver/occupant interview [ ] Other (specify):  /AL  [ ] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:  33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown  34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No
	(2) Yes (specify):  (9) Unknown

	FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35.	6. Had Vehicle Been in Previous Accident(s)?  (0) Not equipped/not available (1) No previous accidents  Yes	40. Longitudinal Component of + Delta V For Air Bag - ψ ψ Φ Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact
	<ul> <li>(2) Previous accident(s) without deployment(s)</li> <li>(3) One previous accident with deployment</li> <li>(4) More than one previous accident with at least one deployment</li> <li>(8) Previous accidents, unknown deployment status</li> <li>(9) Unknown</li> </ul>	that initiated the air bag deployment  (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
	Type of Air Bag  (0) Not equipped/not available  (1) Original manufacturer installed system  (2) Retrofitted air bag  (3) Replacement air bag  (8) Unknown type of air bag  (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
	Had Any Prior Maintenance/Service  Been Performed On This Air Bag System?  (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify):  (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged?  (0) Not equipped/not available (1) No (2) Yes (specify):  (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed
	Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown  43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
(	CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):
• (	(6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

FIRST SEAT FRONTAL AIR BAG SYS EVALUATION continued	STE.M	HEAD RESTRAINT AND SEAT EVALUATION
44. Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify):  (03) Object carried by occupant, (specify):  (04) Adaptive/assistive controls, (specify):  (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (88) Other damage source (specify):  (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown	φ <i>φ</i>	49. Head Restraint Type/Damage by Occupant at This Occupant Position  (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown  50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions
45. Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	4	<ul> <li>(05) Bench with folding back(s)</li> <li>(06) Split bench with separate back cushions</li> <li>(07) Split bench with folding back(s)</li> <li>(08) Pedestal (i.e., column supported)</li> <li>(09) Box mounted seat (i.e., van type)</li> <li>(10) Other seat type (specify):</li> </ul>
(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown  46. Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):  (3) Deployed, unknown if vent ports present (7) Not deployed	<u></u>	(99) Unknown  51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify): (9) Unknown
<ul> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> <li>47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant?</li> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify):</li> <li>(3) Deployed, unknown if other occupant con air bag</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>	Ψ tact to	52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track  Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
48. Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	4	

# HEAD RESTRAINT AND SEAT EVALUATION continued 53. Seat Back Incline Prior and Post Impact (00) Occupant not seated or no seat (01) Not adjustable

### Upright prior to impact

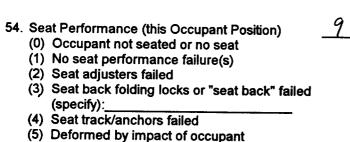
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

### Slightly reclined prior to impact

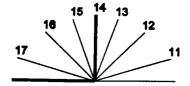
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

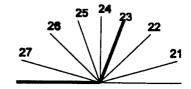
### Completely reclined prior to impact

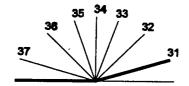
- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown



- (6) Deformed by passenger compartment intrusion, (specify):\_\_\_\_
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown







		CHIL	_D SA	AFETY SEAT	
	hild Safety Seat Make/Model 00) No child safety seat	95	<u> </u>	58. Child Safety Seat Harness Usage	12
A D	oplicable codes are found in your NAS ata Collection, Coding and Editing 50) Built-in child safety seat	S CDS		59. Child Safety Seat Shield Usage	43
(9	97) Other make/model (specify):		_	60. Child Safety Seat Tether Usage	<i>q</i> 3
	98) Unknown make/model 99) Unknown if child safety seat used			Note: Options below applicable to Variables OA58-OA60.	
(0	pe of Child Safety Seat No child safety seat Infant seat			(00) No child safety seat  Not Designed With Harness/Shield/Tether	
(2)	Toddler seat Convertible seat			(01) After market harness/shield/tether added, not used	
(5)	Booster seat - with shield Booster seat - without shield Other type child safety seat (specify)	•		(02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added	
(8)	Unknown child safety seat type Unknown if child safety seat used		,	(09) Unknown if harness/shield/tether added or used	
		7.	2	Designed With Harness/Shield/Tether (11) Harness/shield/tether not used	
	ild Safety Seat Orientation  ) No child safety seat			(12) Harness/shield/tether used (19) Unknown if harness/shield/tether used	
(01	signed for Rear Facing for This Age/M ) Rear facing ) Forward facing	/eight		Unknown If Designed With Hamess/Shield/Te (21) Harness/shield/tether not used	ther
30)	Other orientation (specify):			(22) Harness/shield/tether used (29) Unknown if harness/shield/tether used	
·	Unknown orientation	na AA/a ind		(99) Unknown if child safety seat used	
(11	s <i>igned For Forward Facing for This Ag</i> )   Rear facing )   Forward facing	je/vveigi	nt		
(1,8 (19	Other orientation (specify):  Unknown orientation				
Uni	known Design or Orientation For This				
	e:///weight, or Unknown Age/Weight  ) Rear facing  ) Forward facing				
(28	Other orientation (specify):				
	Unknown orientation Unknown if child safety seat used				
	•				

INJURY CONSEQUENCES  61. Injury Severity (Police Rating)  (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating irrjury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown	<u>3</u>	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown
(3) A - Incapacitating irrjury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):  Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown if treated (9) Unknown	3 	(3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):  (9) Unknown  64. Hospital Stay  (00) Not Hospitalized  Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days Lost  Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
3107	VVU'	RK HERE

**VARIABLES 66-74** 

66. Time to Death  Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60)  (00) Not fatal (96) Fatal - ruled disease (99) Unknown  67. 1st Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility (97) Injured, details unknown (99) Unknown if injured (1) No - blood not given (2) Yes - blood given  72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (97) (100) Not injured (97) (97) (1) Injured ABGs not measured or reported	INJURY CONSEQUENCES	TRAUMA DATA
<ul> <li>67. 1st Medically Reported Cause of Death</li> <li>68. 2nd Medically Reported Cause of Death</li> <li>69. 3rd Medically Reported Cause of Death</li> <li>Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to</li> <li>(1) No - blood not given</li> <li>(2) Yes - blood given</li> <li>(3) Yes - blood given</li> <li>(4) Ψ</li> <li>(5) Unknown if blood given</li> <li>73. Arterial Blood Gases (ABG) – HCO<sub>3</sub></li> <li>(60) Not injured</li> </ul>	Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60)  (00) Not fatal  (96) Fatal - ruled disease	(at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
69. 3rd Medically Reported Cause of Death  Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to  (9) Unknown if blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (00) Not injured		(1) No - blood not given (2) Yes - blood given
<ul> <li>(00) Not fatal or no additional causes</li> <li>(96) Mode of death given but specific injuries are not linked to cause of death. (specify):</li> <li>(97) Other result (includes fatal ruled disease) (specify):</li> <li>(99) Unknown</li> <li>70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant.</li> <li>(00) No recorded injuries</li> <li>(07) Official injury data</li> <li>(08) ABGs reported, HCC<sub>0</sub> unknown</li> <li>(97) Injured, details unknown</li> <li>(99) Unknown if injured</li> <li>74. Primary Source of Belt Use Determination</li> <li>(00) Not equipped/not available/destroyed or rendered inoperative</li> <li>(1) Vehicle inspection</li> <li>(2) Official injury data</li> <li>(3) Driver/occupant interview</li> <li>(8) Other (specify): PAK</li> <li>(9) Unknown if belt used</li> </ul>	Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  (97) Other result (includes fatal ruled disease) (specify):  (99) Unknown  70. Number of Recorded Injuries for This Occupant Φ / I Code the actual number of injuries recorded for this occupant.  (00) No recorded injuries (97) Injured, details unknown	(9) Unknown if blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> 97 (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown (97) Injured, details unknown (99) Unknown if injured  8  BELT USE DETERMINATION  74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): PAR

1. Primary Sampling Unit Number

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

**National Highway Traffic Safety** OCCUPANT INJURY FORM Administration

3. Vehicle Number

91

2. Case Number - Stratum

AB

4. Occupant Number

4

### **INJURY DATA**

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				A.I.S 90	5				Injury		Occupant
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
1st	5. <u>7</u>	6	7. <u>5</u> 8	: <u>      4</u>	a. <u>4 4</u>	10	11. 9 12	697	13. 9 1	<u>. 7</u>	15. <u>4.4</u>

1st	5. <u>7</u>	6	7. <u>5</u>	8. <u>P 4</u>	9. <u>44</u>	10.2	11. 9	12. 697	13. 9	14. 7	15. <u>44</u>
2nd	16	17	18	19	20	21	22	23	24	25	26
3rd	27	28	29	30	31	32	33	34	35	36	37
4th	38	39	40	41	42	43	44	45	46	47	48
5th	49	50,	51	52	53	54	55,	56	57	58	59
6th	60	61	62	63	64	65	66	67	68	69	70
7th	71.	72.	73.	74.	75.	76.	77.	78.	79	80	810 B1

98.

109.

8th

10th

83.

105.

106.

107.

108.

100.

111.

101.

112.

102.

103.

				OCC A.I.S 90	UPANT	INJURY	DATA		Inium		Occupant
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
11th			_			_	_		_		
12th	_	_	_			_					
13th											
		_	_			_	_		_		
14th					——		_				
15th	_	—		——		_	—			-	
16th	_	_	_			_	_		_	_	
17th			_			_	_		_	_	
18th	_										
19th	_	_	_			_					
20th											
											# - <del></del>
21st			<del></del> .			-	_		_		
22nd			_				_				***************************************
23rd		—				_			_		-
2 <b>4t</b> h											
25th											<del></del>

### OCCUPANT INJURY CLASSIFICATION

### **Body Region**

- Head
- Face
- (2) (3) (4) (5) (6) Neck
- Thorax
- Abdomen
- Spine
- **Upper Extremity** (7)
- (8) Lower Extremity
- Unspecified

### Type of Anatomic Structure

- Whole Area
- Vessels
- Nerves
- (2) (3) (4) Organs (includes Muscles/ligaments)
- (5) Skeletal (includes ioints)
- Head LOC
- **(9)** Skin

### **Specific Anatomic** Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

### Whole Area

- (02) Skin Abrasion
- (04) Skin Contusion
- (06) Skin - Laceration (08)Skin - Avulsion
- (10)Amputation
- (20)Burn
- Crush (30)
- Degloving (40)
- (50) Injury - NFS
- (90)Trauma, other than mechanical

### Head - LOC

- (02) Length of LOC
- (04) Level
- (06)
- (08) Consciousness
- (10) Concussion

### **Spine**

- Cervical (02)
- (04)Thoracic
- (06) Lumbar

### Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

- Minor Injury
- (2) (3) Moderate Injury
- Serious Injury
- (4) (5) Severe Injury
- (6)
- (untreatable)
- Injured, unknown

### Aspect

- Right (2)
  - Left
- (3) Bilateral (4)
  - Central
- (5) **Anterior**
- (6) Posterior Superior
- (7) (8) Inferior
- (9) Unknown
- (O) Whole region

### **Abbreviated Injury Scale**

- Critical Injury
- Maximum
- severity

### SOURCE OF INJURY DATA

# CONFIDENCE LEVEL

INJURY SOURCE

### OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

### **UNOFFICIAL RECORDS**

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

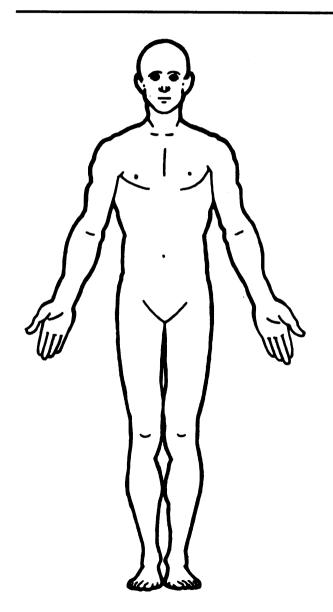
### DIRECT/INDIRECT INJURY

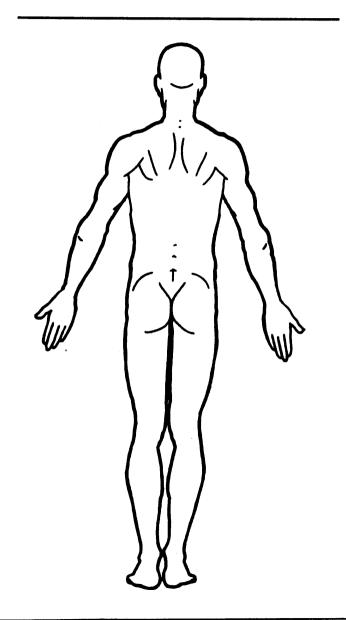
- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

- Direct contact injury
- (2) Indirect contact injury
- Noncontact injury
- Injured, unknown source

### **INJURY SOURCES** FRONT (102) Right side hardware or (183) Air bag-passenger side and (411) Wall mounted head rest (used (001) Windshield object held behind wheel chair) (412) Other adaptive device (103)Right A (A1/A2)-pillar (002)Mirror (184) Air bag-passenger side and (003)Sunvisor (104)Right B-pillar object in mouth (specify): (004) Steering wheel rim (105) Other right pillar (specify): (185) Air bag compartment (005) Steering wheel hub/spoke cover-passenger side (006)Steering wheel (combination (106)Right side window glass (186) Air bag compartment **EXTERIOR of OCCUPANT'S** of codes 004 and 005) (107) Right side window frame **VEHICLE** cover-passenger side and (007) Steering column, transmission (108) Right side window sill (451) Hood evewear selector lever, other Right side window glass (187) Air bag compartment (452)Outside hardware (e.g., attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB radio following: frame, window sill. iewelry (453)Other exterior surface or tires Add on equipment (e.g., tape A (A1/A2)-pillar, B-pillar, or (188) Air bag compartment (009)(specify): deck, air conditioner) roof side rail. cover-passenger side and (010) Left instrument panel and (110) Other right side object object held (454) Unknown exterior objects below (specify): (189) Air bag compartment (011) Center instrument panel and EXTERIOR OF OTHER MOTOR cover-passenger side and object in mouth VEHICLE below (012)Right instrument panel and INTERIOR (501) Front bumper (190) Other air bag (specify) below (151) Seat, back support (502) Hood edge (013) Glove compartment door (152) Belt restraint webbing/buckle (195) Other air bag compartment (503) Other front of vehicle (014) Knee bolster (153)Belt restraint B-pillar or door cover (specify) (specify): (015) Windshield including one or frame attachment point more of the following: front (154) Other restraint system (504) Hood header, A (A1/A2)-pillar, component (specify): ROOF (505) Hood ornament instrument panel, mirror, or (201) Front header (506) Windshield, roof rail, A-pillar (155)(507) steering assembly (driver side (202) Rear header Head restraint system Side surface Roof left side rail only) (160) Other occupants (specify): (203)(508)Side mirrors (016) Windshield including one or Roof right side rail (509)Other side protrusions (204)more of the following: front Interior loose objects (205)Roof or convertible top (specify): header, A (A1/A2)-pillar, (162)Child safety seat (specify): instrument panel, or mirror **FLOOR** (510) Rear surface (passenger side only) (511) Undercarriage (163)Other interior object (specify): (251) Floor (including toe pan) (017) Windshield reinforced by (252) Floor or console mounted Tires and wheels (512) exterior object (specify) transmission lever, including (513) Other exterior of other motor AIR BAG console vehicle (specify): (019) Other front object (specify): (170) Air bag-driver side (253) Parking brake handle (171) Air bag-driver side and (254) Foot controls including (514) Unknown exterior of other evewear parking brake motor vehicle LEFT SIDE (172) Air bag-driver side and jewelry (051) Left side interior surface, (173) Air bag-driver side and object REAR OTHER VEHICLE OR OBJECT IN excluding hardware or Backlight (rear window) THE ENVIRONMENT (301) armrests (174) Air bag-driver side and object (302) Backlight storage rack, (551) Ground (052) Left side hardware or armrest (598) Other vehicle or object in mouth door, etc. (053) Left A (A1/A2)-pillar (175) Air bag compartment (303) Other rear object (specify): (specify): (054) Left B-pillar cover-driver side (055) Other left pillar (specify): (176) Air bag compartment (599) Unknown vehicle or object cover-driver side and eyewear ADAPTIVE (ASSISTIVE) DRIVING (056) Left side window glass (177) Air bag compartment **EQUIPMENT** NONCONTACT INJURY (057) Left side window frame cover-driver side and jewelry (401) Hand controls for (601) Fire in vehicle (058) Left side window sill (178) Air bag compartment braking/acceleration (602) Flying glass · (059)Left side window glass cover-driver side and object (402) Steering control devices (603) Other noncontact injury including one or more of the held (attached to OEM steering source following: frame, window sill, (179) Air bag compartment wheel) (specify): A (A1/A2)-pillar, B-pillar, or cover-driver side and object in (403) Steering knob attached to (604) Air bag exhaust gases roof side rail. steering wheel (697) Injured, unknown source (060) Other left side object (180) Air bag-passenger side (405) Replacement steering wheel (specify): (181)Air bag-passenger side and (i.e., reduced diameter) (406)Joy stick steering controls evewear (182) Air bag-passenger side and Wheelchair tie-downs (407) RIGHT SIDE iewelry (408) Modification to seat belts, (101) Right side interior surface, (specify):\_ excluding hardware or Additional or relocated armrests switches, (specify): (410) Raised roof

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

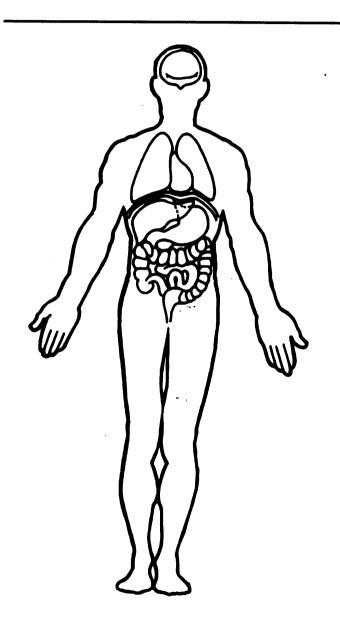


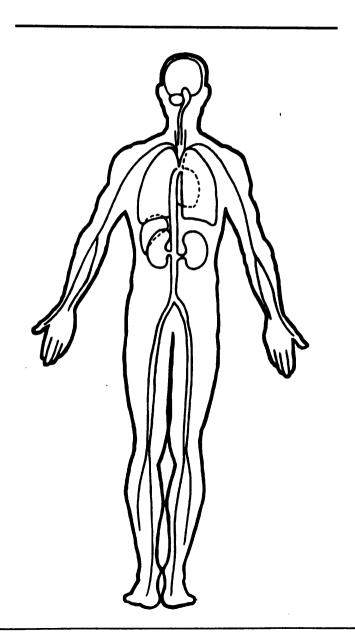


	OFFICIAL INJURY DATA — S	SKELETAL INJURIES	
Restrained?			
No	dicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, ource of all injuries indicated by official sources (or from PAR or other unofficial sources)	head injury clinical signs and neurological deficits), and	
Yes	navailable.)	urces ii medicai records and interviewee data are	
Blood Alcohol Leve (mg/dl)	UNKNOWN SOURCE		
BAL =	المناسبة الم		
Glasgow Coma Scale Score			
GCSS =			
Units of Blood Given			
Units =			
Arterial Blood Gase	MARIN CONTRACTOR OF THE PROPERTY OF THE PROPER		
pH = PO₂=			
PCO <sub>2</sub>			
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		W// )) W	

# OFFICIAL INJURY DATA —INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

OCCUPANT INJURY DATA SUPPLEMENT											
	Source of Injury	Podu	Type of	A.I.S		A.1.6		1-1	Injury Source	Direct/	Occupani Area
	Data	Body Region	Anatomic Structure	Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Confidence Level	Indirect Injury	Intrusion Number
				<del></del>	<del></del>		_				
			<del></del>			_	_		******		
		_							_		
		_							-		
		_									
<del></del>	<u> </u>	_	_								<del></del>
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		*******	-				<del></del>				
			_								
<del></del>						_				<del></del>	

1. Primary Sampling Unit Number

**OCCUPANT'S CHARACTERISTICS** 

(00) Less than one year old (specify by month):

(3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month)

Code actual age at time of accident.

(2) Female-not reported pregnant

(6) Female-pregnant-term unknown

Code actual height to the nearest

Code actual weight to the nearest

inches X 2.54 = \_\_\_\_ centimeters

\_\_\_\_ pounds X .4536 = \_\_\_\_ kilograms

## U.S. Department of Transportation OCCUPANT ASSESSMENT FORM FORM Approved OMR No. 2127 Appr

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dministration

**National Highway Traffic Safety** 

2. Case Number - Stratum

(97) 97 years and older

3. Vehicle Number

5. Occupant's Age

(99) Unknown

6. Occupant's Sex (1) Male

(9) Unknown

7. Occupant's Height

8. Occupant's Weight

centimeter. (999) Unknown

kilogram. (999) Unknown

9. Occupant's Role (1) Driver (2) Passenger (9) Unknown

4. Occupant Number

·	NATIONAL ACCIDENT SAMPLING SYSTE CRASHWORTHINESS DATA SYSTE
	OCCUPANT'S SEATING
# B 1 7  # 1  # 5  ERISTICS  # B  y by month):	10. Occupant's Seat Position  Front Seat  (11) Left side (12) Middle (13) Right side (14) Other (specify): (15) On or in the lap of another occupant  Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
1st-3rd month) (4th-6th month) (7th-9th month)	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant
999	Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area
g 9 9	(98) Other seat (specify):(99) Unknown  11. Occupant's Posture
ilograms	(0) Normal posture  Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify):

EJI	ECTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	4	15. Medium Status (Immediately Prior To Impact)  (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	4	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or
14. Ejection Medium  (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):  (9) Unknown	<u></u>	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

		BELT SYSTI	EM F	UNCTION
18.	Ma (0) (1) (2) (3) (4) (5)	nual (Active) Belt System Availability None available Belt removed/destroyed Shoulder belt Lap belt Lap and shoulder belt Belt available—type unknown	22	Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt  Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position
	Inte (6) (7) (8)	Lap belt (shoulder belt destroyed/removed)	22	(4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment
	(9)	Unknown	23.	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available
19.	(00	nual (Active) Belt System Use ) None used, not available, or belt removed/destroyed ) Inoperative (specify):		<ul><li>(1) 2 point automatic belts</li><li>(2) 3 point automatic belts</li><li>(3) Automatic belts - type unknown</li></ul>
	(02 (03 (04	Shoulder belt Lap belt Lap and shoulder belt	24	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown
	(08	Belt used—type unknown Other belt used (specify):	24.	Automatic (Passive) Belt System Use  (0) Not equipped/not available/destroyed or rendered inoperative  (1) Automatic belt in use
	(13	Shoulder belt used with child safety seat  Lap belt used with child safety seat  Lap and shoulder belt used with child  safety seat		(2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):  (3) Automatic belt use unknown
	(15) (18)	Belt used with child safety seat—type unknown Other belt used with child safety seat (specify):	25	(9) Unknown  Automatic (Passive) Belt System Type
20	•	Unknown if belt used  per Use of Manual (Active) Belts	20.	(0) Not equipped/not available (1) Non-motorized system (2) Motorized system
20.	(0) (1)	None used or not available Belt used properly Belt used properly with child safety seat	26.	<ul><li>(9) Unknown</li><li>Proper Use of Automatic (Passive)</li><li>Φ</li><li>Belt System</li></ul>
	(3) (4) (5)	Used Improperly Shoulder belt worn under arm Shoulder belt worn behind back or seat Belt worn around more than one person Lap belt worn on abdomen		<ul> <li>(0) Not equipped/not available/not used</li> <li>(1) Automatic belt used properly</li> <li>(2) Automatic belt used properly with child safety seat</li> </ul> Automatic Belt Used Improperly
	(7)	Lap belt or lap and shoulder belt used improperly with child safety seat (specify):		(3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than
		Other improper use of manual belt system (specify):		one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or
	` '	Unknown  ual (Active) Belt Failure Modes		automatic shoulder belt used improperly
	Duri (0) (1)	nual (Active) Belt Failure Modes ng Accident No manual belt used or not available No manual belt failure(s) Torn webbing (stretched webbing not		with child safety seat (specify):  (8) Other improper use of automatic belt system (specify):  (9) Unknown
	(3) (4)	included) Broken buckle or latchplate Upper anchorage separated Other anchorage separated (specify):	27.	Automatic (Passive) Belt Failure Modes  During Accident  (0) Not equipped/not available/not in use
	(6) (7)	Broken retractor Combination of above (specify):		<ul> <li>(1) No automatic belt failure(s)</li> <li>(2) Torn webbing (stretched webbing not included)</li> <li>(3) Broken buckle or latchplate</li> <li>(4) Upper anchorage separated</li> </ul>
	(8)	Other manual belt failure (specify):		(5) Other anchorage separated (specify):
	(9)	Unknown		<ul><li>(6) Broken retractor</li><li>(7) Combination of above (specify):</li><li>(8) Other automatic belt failure (specify):</li></ul>
			1	(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
<ul> <li>(9) Police indicated "unknown"</li> <li>29. Police Reported Air Bag Availability/Function <ul> <li>(0) No air bag available</li> <li>(1) Police did not indicate air bag availability/function</li> <li>(2) Deployed</li> <li>(3) Not deployed</li> <li>(4) Unknown if deployed</li> <li>(9) Police indicated "unknown"</li> </ul> </li> </ul>	<ul> <li>31. Frontal Air Bag System Deployment (This Occupant Position)</li> <li>(0) Not equipped/not available</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
Check the Primary Source Used In Determining Belt Use.  [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of *other* air bag present:
	<ul> <li>33. Air Bag(s) Deployment, Other Than First</li></ul>
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

	FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35.	Had Vehicle Been in Previous Accident(s)?  (0) Not equipped/not available (1) No previous accidents  Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of  Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36.	Type of Air Bag  (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?  (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
	Had Any Prior Maintenance/Service  Been Performed On This Air Bag System?  (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify):  (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged?
	Air Bag Deployment Accident Event  Sequence Number  (00) Not equipped/not available  Code the accident event sequence number that initiated the air bag deployment  (96) Deployed, unknown event  (97) Not deployed  (98) Unknown if deployed  (99) Unknown	(8) Unknown if deployed (9) Unknown  43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
	CDC For Air Bag Deployment Impact  (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):  (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION	
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify):  (03) Object carried by occupant, (specify):  (04) Adaptive/assistive controls, (specify):  (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify):	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown	
<b>45</b> .	(95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown  Was The Air Bag Tethered?  (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):	
	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown  Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	(99) Unknown  51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):	-
<b>47</b> .	(3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown  Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify):	(9) Unknown  52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track  Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions	-
48.	(3) Deployed, unknown if other occupant contact to air bag (7) Not deployed (8) Unknown if deployed (9) Unknown  Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses	<ul> <li>(4) Seat at middle track position</li> <li>(5) Seat between middle and rear most track positions</li> <li>(6) Seat at rear most track position</li> <li>(9) Unknown</li> </ul>	
	<ul> <li>(2) Lyeglasses/surglasses</li> <li>(3) Contact lenses</li> <li>(4) Deployed, unknown if eyewear worn</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>		

99

8

### HEAD RESTRAINT AND SEAT EVALUATION continued

- 53. Seat Back Incline Prior and Post Impact
  - (00) Occupant not seated or no seat
  - (01) Not adjustable

### Upright prior to impact

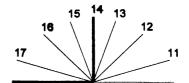
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

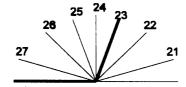
### Slightly reclined prior to impact

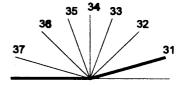
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

### Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
  - (0) Occupant not seated or no seat
  - (1) No seat performance failure(s)
  - (2) Seat adjusters failed
  - (3) Seat back folding locks or "seat back" failed (specify):
  - (4) Seat track/anchors failed
  - (5) Deformed by impact of occupant
  - (6) Deformed by passenger compartment intrusion, (specify):
  - (7) Combination of above (specify):
  - (8) Other (specify): DEFORMED BY CARGO
  - (9) Unknown







CHILD SA	FETY SEAT
55. Child Safety Seat Make/Model <u>4 4 4</u> (000) No child safety seat Applicable codes are found in your NASS CDS	58. Child Safety Seat Harness Usage
Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	59. Child Safety Seat Shield Usage
(998) Unknown make/model (999) Unknown if child safety seat used	60. Child Safety Seat Tether Usage
1 (a) Type of Child Safety Seat (b) No child safety seat (c) Infant seat (d) Toddler seat (e) Toddler seat (f) Convertible seat (g) Convertible seat (g) Booster seat - with shield (g) Booster seat - without shield (g) Other type child safety seat (specify):  (g) Unknown child safety seat type (g) Unknown if child safety seat used	Variables OA58-OA60. (00) No child safety seat  Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used  Designed With Harness/Shield/Tether
57. Child Safety Seat Orientation (00) No child safety seat  Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify):  (09) Unknown orientation  Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify):  (19) Unknown orientation  Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify):  (29) Unknown orientation  (99) Unknown if child safety seat used	(11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used  Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

INJURY CONSEQUENCES	
(0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):   Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Treatment)  (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):  (9) Unknown  64. Hospital Stay  (00) Not Hospitalized  Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days Lost  Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
CTOD W	

### STOP WORK HERE

**VARIABLES 66-74** 

INJURY CONSEQUENCES	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60)  (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death <u> </u>	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given
<ul> <li>68. 2nd Medically Reported Cause of Death</li> <li>69. 3rd Medically Reported Cause of Death</li> <li>φ</li> <li>φ</li> <li>φ</li> </ul>	(specify units):(9) Unknown if blood given
Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  (00) Not fatal or no additional causes  (96) Mode of death given but specific injuries are not linked to cause of death. (specify):  (97) Other result (includes fatal ruled	73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> (00) Not injured  (01) Injured, ABGs not measured or reported  (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown  (97) Injured, details unknown  (99) Unknown if injured
disease) (specify):	BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

2nd

3rd

16.

27.

2. Case Number - Stratum

17.

28

18.

29.

19.

30.

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

National Highway Traffic Safety
Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

AB 17

20.

3. Vehicle Number

Ø1

4. Occupant Number

45

26

37.

### **INJURY DATA**

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

Source of Injur Data		Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
1st 5. <u>7</u>	6. <u>9</u>	7 <u>5</u>	<u> 54</u>	9. <u>99</u>	10. 7	11. <u>9</u> 12	697	13. 9	4 <u>7</u>	15. <u>4</u> 4

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32.

21.

22.

33.

23.

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TH:										

th.							76						

9th		<b>3</b> 3.			90.						99.			H	102		

10th 104 105 106 107 108 109 110 111 112 113	114
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		OCCUPANT INJURY				DATA		laine			
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th											
12th	—	—				—			—		
13th	—	—	—	——			—				
14th				——		_	_				
15th	_	_	_		——		_				
16th											
						_					
17th	—	—							_		
18th					——	_	_		_		
19th	_			——		_			_		i. 1994: L 1994: <del>Janes</del> J
20th	_		_				_				
21st	—		<del></del> ,	<del></del>		_	_				
22nd	_	_	_				—				
23rd		_	_			_	_				
2411		-									
<b>25th</b>											

#### OCCUPANT INJURY CLASSIFICATION

#### **Body Region**

- Head
- Face
- (2) (3) Neck
- (4) (5) (6) Thorax
- Abdomen
- Spine
- **Upper Extremity**
- (8) Lower Extremity
- Unspecified

#### Type of Anatomic Structure

- Whole Area
- (2) (3) Vessels
- Nerves
- Organs (includes Muscles/ligaments)
- (5)Skeletal (includes joints)
- Head LOC
- **(9)** Skin

#### Specific Anatomic Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

#### Whole Area

- Skin Abrasion (02)
- (04) Skin - Contusion
- (06)Skin - Laceration
- Skin Avulsion (08)
- Amputation (10)
- (20)Burn
- (30) Crush
- Degloving (40)
- Injury NFS (50)
- Trauma, other than (90)mechanical

## Head - LOC

- (02) Length of LOC
- (04)Level
- (06) of
- (80) Consciousness
- (10) Concussion

### **Spine**

- Cervical (02)
- (04)Thoracic
- (06)Lumbar

#### Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

#### **Abbreviated Injury Scale**

- Minor Injury
- (2) (3) Moderate Injury
- Serious Injury
- (4) Severe Injury
- (5) Critical Injury
- Maximum (untreatable)
- lnjured, unknown severity

#### **Aspect**

- Right
- Left
- (2) (3) Bilateral Central
- (4) (5) Anterior
- (6) **Posterior** 
  - Superior
- (8) Inferior
- Unknown (9)
  - Whole region

# SOURCE OF INJURY DATA

# INJURY SOURCE

(1) Certain

(2) Probable

(9) Unknown

Possible

**CONFIDENCE LEVEL** 

#### OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

#### **UNOFFICIAL RECORDS**

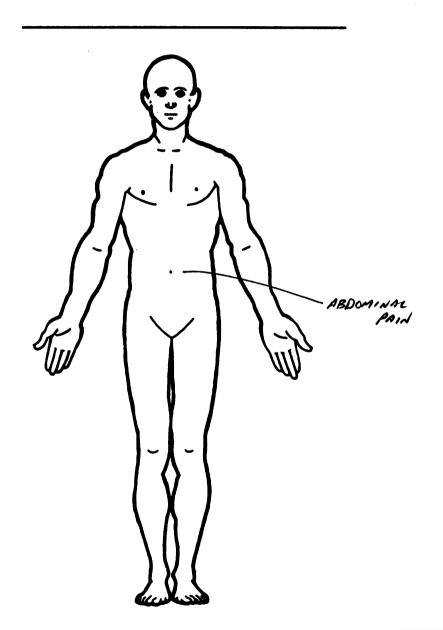
- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

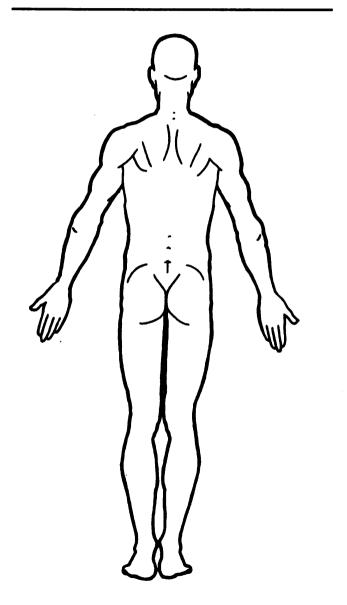
#### DIRECT/INDIRECT INJURY

- Direct contact injury Indirect contact injury
- (2) (3) Noncontact injury
- Injured, unknown source

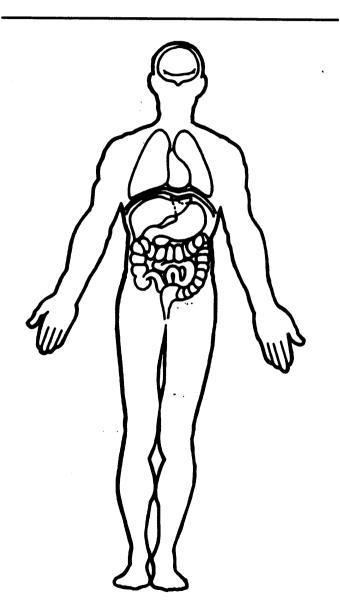
#### **INJURY SOURCES** FRONT (102) Right side hardware or (183) Air bag-passenger side and (411) Wall mounted head rest (used (001) Windshield armrest object held behind wheel chair) (002) Mirror (103)Right A (A1/A2)-pillar (184) Air bag-passenger side and (412) Other adaptive device (003) Sunvisor Right B-pillar object in mouth (104)(specify):\_ (004) Steering wheel rim (105) Other right pillar (specify): (185) Air bag compartment (005)Steering wheel hub/spoke cover-passenger side (006)Steering wheel (combination (106)Right side window glass (186)EXTERIOR of OCCUPANT'S Air bag compartment (107)Right side window frame of codes 004 and 005) cover-passenger side and VEHICLE Right side window sill (007)Steering column, transmission (108)evewear (451) Hood selector lever, other Right side window glass (109)(187) Air bag compartment (452) Outside hardware (e.g., attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB radio following: frame, window sill, jewelry Other exterior surface or tires (009)Add on equipment (e.g., tape A (A1/A2)-pillar, B-pillar, or (188) Air bag compartment (specify): deck, air conditioner) roof side rail. cover-passenger side and (010) Left instrument panel and (110) Other right side object (454) Unknown exterior objects object held (specify): Air bag compartment (011) Center instrument panel and EXTERIOR OF OTHER MOTOR cover-passenger side and helow object in mouth **VEHICLE** (012) Right instrument panel and INTERIOR (190) Other air bag (specify) (501) Front bumper below (151) Seat, back support (502) Hood edge (013) Glove compartment door (152) Belt restraint webbing/buckle (195) Other air bag compartment (503) Other front of vehicle (014) Knee bolster (153) Belt restraint B-pillar or door cover (specify) (specify): (015) Windshield including one or frame attachment point more of the following: front (154) Other restraint system (504) Hood header, A (A1/A2)-pillar, component (specify): ROOF (505)Hood ornament instrument panel, mirror, or Windshield, roof rail, A-pillar (201) Front header (506)steering assembly (driver side (155) Head restraint system (202)Rear header (507)Side surface only) (160) Other occupants (specify): (203)Roof left side rail (508)Side mirrors (016) Windshield including one or Roof right side rail (204)(509)Other side protrusions more of the following: front (161) Interior loose objects (205)Roof or convertible top (specify): header, A (A1/A2)-pillar, (162) Child safety seat (specify): instrument panel, or mirror **FLOOR** (510) Rear surface (passenger side only) (163) Other interior object (specify): (251) Floor (including toe pan) (511) Undercarriage (017) Windshield reinforced by (252) Floor or console mounted Tires and wheels (512)exterior object (specify) transmission lever, including (513) Other exterior of other motor AIR BAG console vehicle (specify): \_ (019) Other front object (specify): (170) Air bag-driver side (253)Parking brake handle Air bag-driver side and (254) Foot controls including (514) Unknown exterior of other evewear parking brake motor vehicle **LEFT SIDE** (172) Air bag-driver side and jewelry (051) Left side interior surface, (173) Air bag-driver side and object REAR OTHER VEHICLE OR OBJECT IN (301) Backlight (rear window) excluding hardware or held THE ENVIRONMENT armrests (174) Air bag-driver side and object (302)Backlight storage rack. (551) Ground (052) Left side hardware or armrest (598) Other vehicle or object in mouth door, etc. (053) Left A (A1/A2)-pillar (175) Air bag compartment (303) Other rear object (specify): (specify): (054) Left B-pillar cover-driver side Other left pillar (specify): (055)(176) Air bag compartment (599) Unknown vehicle or object ADAPTIVE (ASSISTIVE) DRIVING cover-driver side and eyewear (056) Left side window glass (177) Air bag compartment **EQUIPMENT** NONCONTACT INJURY (057) Left side window frame cover-driver side and jewelry (401) Hand controls for (601) Fire in vehicle (058) Left side window sill (178) Air bag compartment braking/acceleration (602) Flying glass (059) Left side window glass cover-driver side and object Steering control devices (603)Other noncontact injury including one or more of the held (attached to OEM steering source following: frame, window sill. (179) Air bag compartment wheel) (specify): A (A1/A2)-pillar, B-pillar, or cover-driver side and object in (403) Steering knob attached to (604) Air bag exhaust gases roof side rail. mouth steering wheel (697) Injured, unknown source (060) Other left side object (180) Air bag-passenger side (405)Replacement steering wheel (specify): (181) Air bag-passenger side and (i.e., reduced diameter) eyewear (406)Joy stick steering controls (182) Air bag-passenger side and (407) Wheelchair tie-downs jewelry (408) Modification to seat belts, (101) Right side interior surface, (specify): excluding hardware or Additional or relocated armrests switches, (specify): (410) Raised roof

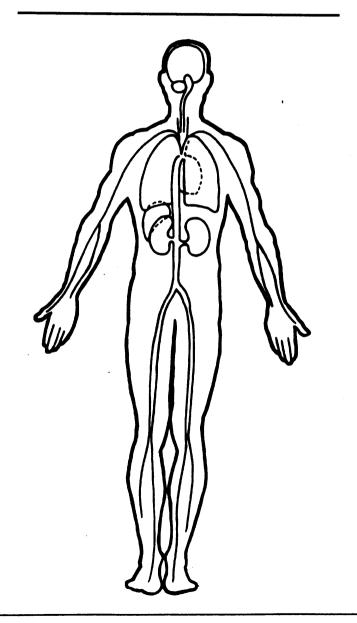
# OFFICIAL INJURY DATA — SOFT TISSUE INJURIES





	OFFICIAL INJURY DATA — SKELETAL INJURIES
Restrained?	
No!	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and
Yes	ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are navailable.)
Blood Alcohol Level	
BAL =	— Museukos Kem
Glasgow Coma Scale Score	- Musculus KEMIL INJURIES -
GCSS =	
Units of Blood Given	
Units =	
Arterial Blood Gase	
pH =	
PO <sub>2</sub> =	
нсо,	





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

				CUPANT	JOI 1 L						
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupan Area Intrusion Number
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National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum ABIT	10. Occupant's Seat Position 3 4
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u>4</u> 6	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month):  (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant  Third Seat
6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	(31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant  Fourth Seat (41) Left side (42) Middle
7. Occupant's Height	(43) Right side (44) Other (specify): UNCHOWN SIDE (45) On or in the lap of another occupant  (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms  9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	11. Occupant's Posture (0) Normal posture  Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

Mational Accident Camping Cystem-Glashworthiness Dat		Page 2
EJECTION/E	NTRAPMENT	
12. Ejection  (0) No ejection  (1) Complete ejection  (2) Partial ejection  (3) Ejection, unknown degree  (9) Unknown	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown	4
13. Ejection Area  (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious of	fire,
14. Ejection Medium  (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):  (9) Unknown	<ul> <li>(1) Removed from vehicle while unconscious of disoriented</li> <li>(2) Removed from vehicle due to injuries</li> <li>(3) Exited vehicle with some assistance</li> <li>(4) Exited vehicle under own power</li> <li>(5) Occupant fully ejected</li> <li>(9) Unknown</li> </ul>	,

	BELT SYSTE	M FUNCTION
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt  Adjustable shoulder Belt Upper Anchorage (2) In full transactions
	<ul> <li>(4) Lap and shoulder belt</li> <li>(5) Belt available—type unknown</li> <li>Integral Belt Partially Destroyed</li> <li>(6) Shoulder belt (lap belt destroyed/removed)</li> <li>(7) Lap belt (shoulder belt destroyed/removed)</li> </ul>	(2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment
	(8) Other belt (specify): (9) Unknown	23. Automatic (Passive) Belt System Availability/
19.	Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):	(0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown
	(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use
	<ul> <li>(08) Other belt used (specify):</li> <li>(12) Shoulder belt used with child safety seat</li> <li>(13) Lap belt used with child safety seat</li> <li>(14) Lap and shoulder belt used with child safety seat</li> </ul>	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown
	(15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify):	(3) Automatic belt use unknown (9) Unknown  25. Automatic (Passive) Belt System Type
20.	(99) Unknown if belt used  Proper Use of Manual (Active) Belts (0) None used or not available	(0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown
	(1) Belt used properly (2) Belt used properly with child safety seat  Belt Used Improperly	26. Proper Use of Automatic (Passive)  Belt System  (0) Not equipped/not available/not used
	<ul> <li>(3) Shoulder belt worn under arm</li> <li>(4) Shoulder belt worn behind back or seat</li> <li>(5) Belt worn around more than one person</li> <li>(6) Lap belt worn on abdomen</li> <li>(7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):</li> </ul>	(1) Automatic belt used properly (2) Automatic belt used properly with child safety seat  Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than
	(8) Other improper use of manual belt system (specify):	<ul> <li>(5) Automatic belt worn around more than one person</li> <li>(6) Lap portion of automatic belt worn on abdomen</li> <li>(7) Automatic lap and shoulder belt or</li> </ul>
21.	(9) Unknown  Manual (Active) Belt Failure Modes	automatic shoulder belt used improperly with child safety seat (specify):
	During Accident  (0) No manual belt used or not available  (1) No manual belt failure(s)  (2) Torn webbing (stretched webbing not included)	(8) Other improper use of automatic belt system (specify):(9) Unknown
	<ul> <li>(3) Broken buckle or latchplate</li> <li>(4) Upper anchorage separated</li> <li>(5) Other anchorage separated (specify)</li> <li>(6) Broken retractor</li> </ul>	27. Automatic (Passive) Belt Failure Modes  During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s)
,	7) Combination of above (specify):  8) Other manual belt failure (specify):	(2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
	9) Unknown	(6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
		(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown"  29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	<ul> <li>31. Frontal Air Bag System Deployment (This Occupant Position)</li> <li>(0) Not equipped/not available</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
Check the Primary Source Used In Determining Belt Use.  [ ] Not equipped/not available/destroyed or rendered inoperative [ ] Vehicle inspection [ ] Official injury data [ ] Driver/occupant interview [ / Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	<ul> <li>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)</li> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
·	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):  (9) Unknown

	FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
<ul><li>(3) One previous acc</li><li>(4) More than one prodeployment</li></ul>	available	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not (1) Original manufact (2) Retrofitted air bag (3) Replacement air l (8) Unknown type of (9) Unknown	turer installed system J bag	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
	This Air Bag System? available ance nance (specify):  Accident Event  ot available accident event sequence number tiated the air bag deployment own event	42. Were Air Bag Module Cover Flap(s) Damaged?   (0) Not equipped/not available (1) No (2) Yes (specify):
(99) Unknown  39. CDC For Air Bag Dep (0) Not equipped/not (1) Highest delta V (2) Second highest delta V (3) Other non-coded  (6) Deployed, unknown (7) Not deployed (8) Unknown if deployed (9) Unknown	elta V delta V (specify):	(02) Ruptured (03) Cut (04) Torn (05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify):  (03) Object carried by occupant, (specify):  (04) Adaptive/assistive controls, (specify):  (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify):  (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown  50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions
<b>4</b> 5.	(99) Unknown  Was The Air Bag Tethered?  (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
46.	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown  Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):  (3) Deployed, unknown if vent ports present	(99) Unknown  51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
	(7) Not deployed (8) Unknown if deployed (9) Unknown  Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify):	52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track  Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions
	<ul> <li>(3) Deployed, unknown if other occupant contact to air bag</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>	(4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
	Was This Occupant Wearing Eye-wear?  (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	

## HEAD RESTRAINT AND SEAT EVALUATION continued

- 53. Seat Back Incline Prior and Post Impact
  - (00) Occupant not seated or no seat
  - (01) Not adjustable

#### Upright prior to impact

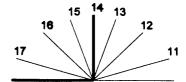
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

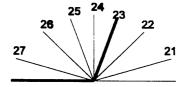
### Slightly reclined prior to impact

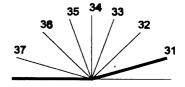
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

#### Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
- 8
- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):\_\_\_\_\_
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):\_\_\_\_\_
- (7) Combination of above (specify):
- (8) Other (specify): DEFORMED BY CALGO
- (9) Unknown







CHI	LD SAF	ETY SEAT
55. Child Safety Seat Make/Model φ φ (000) No child safety seat Applicable codes are found in your NASS CDS	<u> </u>	58. Child Safety Seat Harness Usage <u><math>\phi</math></u> $\phi$
Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):		59. Child Safety Seat Shield Usage
(998) Unknown make/model (999) Unknown if child safety seat used		60. Child Safety Seat Tether Usage  Δ Φ  Note: Options below applicable to Variables OA58-OA60.
56. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify):  (8) Unknown child safety seat type (9) Unknown if child safety seat used  57. Child Safety Seat Orientation (00) No child safety seat  Designed for Rear Facing for This Age/Weight (01) Rear facing	<u>4</u>	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used  Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used  Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used
(02) Forward facing (08) Other orientation (specify):  (09) Unknown orientation  Designed For Forward Facing for This Age/Wei (11) Rear facing (12) Forward facing (18) Other orientation (specify):	ight	(22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used
Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify):  (29) Unknown orientation (99) Unknown if child safety seat used		

INJURY CONSEQUENCES			
61. Injury Severity (Police Rating)  (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):  Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Trea (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):  (9) Unknown  64. Hospital Stay (00) Not Hospitalized  Code the number of days (up threat the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days Lost  Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	9	9

## STOP WORK HERE

**VARIABLES 66-74** 

TO BE CODED BY THE ZONE CENTER

# TO BE CODED BY THE ZONE CENTER

INJURY CONSEQUENCES		TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60)  (00) Not fatal  (96) Fatal - ruled disease  (99) Unknown	<u>¢</u> <u>¢</u>	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death  68. 2nd Medically Reported Cause of Death	4 4 4 4	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units):
69. 3rd Medically Reported Cause of Death  Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death  (00) Not fatal or no additional causes  (96) Mode of death given but specific injuries are not linked to cause	4 9	(9) Unknown if blood given  73. Arterial Blood Gases (ABG) – HCO <sub>3</sub>
of death. (specify):  (97) Other result (includes fatal ruled disease) (specify):	<b>-</b>	(99) Unknown if injured  BELT USE DETERMINATION
70. Number of Recorded Injuries for This OccupantCode the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	φ 1	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

BEST AVAILABLE

**National Highway Traffic Safety** OCCUPANT INJURY FORM Administration

3. Vehicle Number 1. Primary Sampling Unit Number AB 17 4. Occupant Number 2. Case Number - Stratum

# **INJURY DATA**

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

										Occupa	
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusio Numbe
1st	5. <u>7</u>	6. 8	7. <u>9</u>	8 <u>5</u> 9	<u>9 9</u>	107	11. <u>Z</u>	12.697	13. <u>9</u>	14. <u>7</u>	15. <u>4</u> 4
2nd	16	17	18	19	20	21	22	23	24	25	<b>26</b>
3rd	27	28	29 :	30	31	32	33	34	35 :	36	37
<b>4t</b> h	38	39	40	<b>4</b> 1,	42	43	44	45	46	<b>\$</b> 7	48
5th	49	50	51 5	52	53	54	55	56	57	58	59
Sth	60	61	62 (	53. <u> </u>	64	65	66	67	68	69	70
7th	71	72	73 7	'4 <u></u>	75	76	π	78	79	30	81
3th	82	83	84 6	)5	86	87	88	89	90	)1. <u>—</u>	92
lth .	93	94	95 9	v6	97	98	991	00	101 10	<b>52</b> 1	103
Oth	104	105 1	06 10	)7	108	109	110 1	11.	112. 1	13 1	114.

				OCC A.I.S 90	UPANT	INJURY	' DATA				_
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th			-			_					
12th	_	_					_			_	
13th	_	_	_				_		_		
14th			_			_	_				
15th		_	_			_	_				
180n	_	_							_		
17th	_	_					_		_		
18th	_	_				_					
19th	_	_	_				_				
20th	_	_					_				
21st											
<b>22nd</b>											
23rd											
24th							-			<del>,</del>	
							-		rich en generale. Table		

### OCCUPANT INJURY CLASSIFICATION

### **Body Region**

- Head
- Face
- (2) (3) (4) (5) Neck
- Thorax
- Abdomen
- (6)Spine
- (7) (8) **Upper Extremity** Lower Extremity
- (9) Unspecified

#### Type of Anatomic Structure

- Whole Area
- Vessels
- **Nerves**
- (2) (3) (4) Organs (includes Muscles/ligaments)
- (5) Skeletal (includes joints)
- Head LOC
- (9) Skin

#### **Specific Anatomic** Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

#### Whole Area

- (02) Skin Abrasion
- Skin Contusion (04)
- (06)Skin - Laceration
- (80)Skin - Avulsion
- (10)**Amputation**
- (20)Burn
- (30)Crush
- (40)Degloving
- Injury NFS (50)
- Trauma, other than (90)mechanical

#### Head - LOC

(02) Length of LOC

- (04) Level
- (06) of
- Consciousness (08)
- (10) Concussion

#### Spine

- (02)Cervical
- (04)Thoracic
- (06)Lumbar

#### Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as (9) to severity or where only one (0) injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

## **Abbreviated Injury Scale**

- (2) (3) (4) (5) Serious Injury
- Severe Injury
- (untreatable)
- severity

#### Aspect

- Right
- Left (2)
- (3)Bilateral
- (4) (5) Central
- Anterior (6)**Posterior**
- (7)Superior
- (8) Inferior
  - Unknown
  - Whole region

- Minor Injury
- Moderate Injury
- Critical Injury
- (6) Maximum
- Injured, unknown

## SOURCE OF INJURY DATA

#### OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical

- records (2) Hospital/medical records other than emergency room
- (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

### **UNOFFICIAL RECORDS**

- (5) Lay coroner report
- (6) E.M.S. personnel
- Interviewee
- (8) Other source (specify):
- (9) Police

## **INJURY SOURCE**

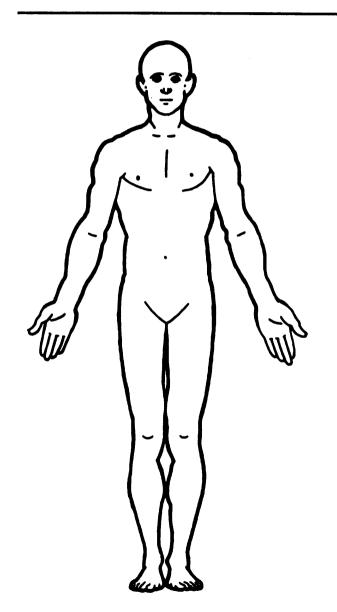
### **CONFIDENCE LEVEL**

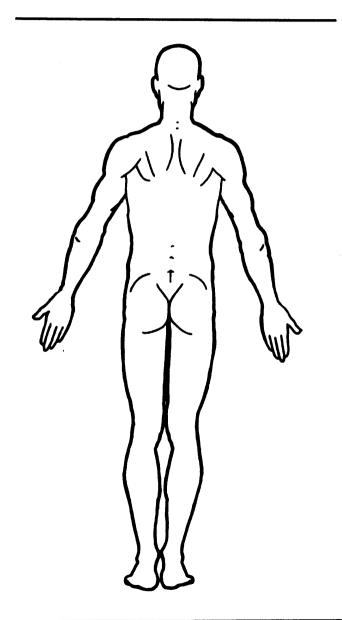
- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

### DIRECT/INDIRECT INJURY

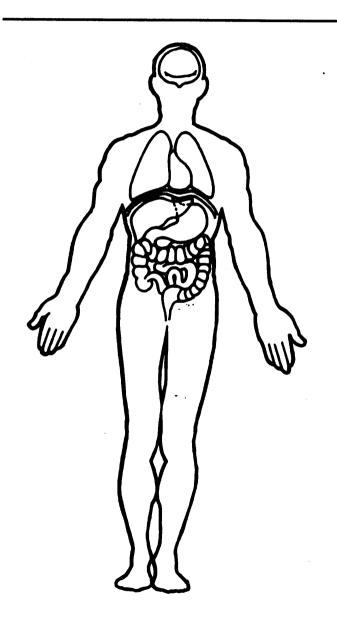
- Direct contact injury
- (2)Indirect contact injury
  - Noncontact injury
- Injured, unknown source

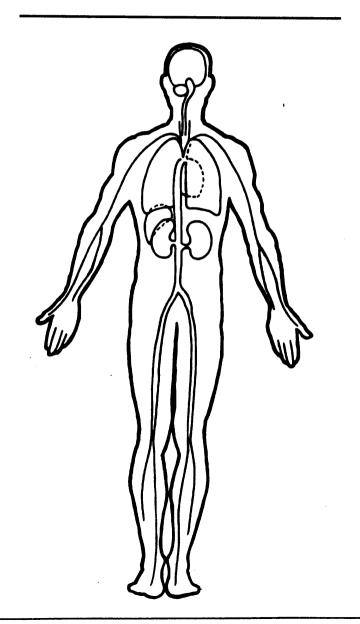
			INJURY		IOL3		
FRON	ıT	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest (use
(001)	Windshield	, , , ,	armrest	` ,	object held	( ,	behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	
(003)	Sunvisor	(104)	Right B-pillar	` ,	object in mouth	( ,	(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		()
(005)	Steering wheel hub/spoke	• •		,	cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	•	EXTE	RIOR of OCCUPANT'S
, ,	of codes 004 and 005)	(107)	Right side window frame	( ,	cover-passenger side and	VEHIC	
(007)	Steering column, transmission	(108)	Right side window sill		eyewear		Hood
` ′	selector lever, other	(109)	Right side window glass	(187)	Air bag compartment	(452)	
	attachment	` ,	including one or more of the	(,	cover-passenger side and	(,	outside mirror, antenna)
(800)	Cellular telephone or CB radio		following: frame, window sill,		jewelry	(453)	
(009)	Add on equipment (e.g., tape		A (A1/A2)-pillar, B-pillar, or	(188)	Air bag compartment	( /	(specify):
` ′	deck, air conditioner)		roof side rail.	( /	cover-passenger side and		(0)00
(010)	Left instrument panel and	(110)			object held	(454)	Unknown exterior objects
( ,	below	(,	(specify):	(189)	•	(404)	Children exterior objects
(011)	Center instrument panel and		(0,000)).	(100)	cover-passenger side and	EYTE	RIOR OF OTHER MOTOR
(3)	below	-			object in mouth	VEHIC	
(012)	Right instrument panel and	INTER	PIOR	(190)	•		
(012)	below			(190)	Other air bag (specify)		Front bumper
(013)	Glove compartment door		Seat, back support	(405)	Other size beautiful and the same state of the s	(502)	Hood edge
. ,	•	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(503)	
(014)	Knee bolster	(153)	Belt restraint B-pillar or door		cover (specify)		(specify):
(015)	Windshield including one or	450	frame attachment point			.==	
	more of the following: front	(154)	•			(504)	Hood
	header, A (A1/A2)-pillar,		component (specify):	ROOF		(505)	Hood ornament
	instrument panel, mirror, or			(201)	Front header	(506)	Windshield, roof rail, A-pillar
	steering assembly (driver side	(155)	Head restraint system	(202)	Rear header	(507)	Side surface
	only)	(160)	Other occupants (specify):	(203)	Roof left side rail	(508)	Side mirrors
(016)	Windshield including one or			(204)	Roof right side rail	(509)	Other side protrusions
	more of the following: front	(161)	Interior loose objects	(205)	Roof or convertible top		(specify):
	header, A (A1/A2)-pillar,	(162)	Child safety seat (specify):				
	instrument panel, or mirror			FLOO	R	(510)	Rear surface
	(passenger side only)	(163)	Other interior object (specify):	(251)	Floor (including toe pan)	(511)	Undercarriage
(017)	Windshield reinforced by			(252)	Floor or console mounted	(512)	Tires and wheels
	exterior object (specify)			, ,	transmission lever, including	(513)	Other exterior of other motor
		AIR B	AG		console	( /	vehicle (specify):
(019)	Other front object (specify):	(170)	Air bag-driver side	(253)	Parking brake handle		
	, , , ,	` '	Air bag-driver side and	(254)	Foot controls including	(514)	Unknown exterior of other
		( ,	eyewear	(== .,	parking brake	(0.4)	motor vehicle
LEFT S	SIDE	(172)	Air bag-driver side and jewelry		parking brake		motor vernole
	Left side interior surface,	(173)	• • •	REAR		OTHE	ER VEHICLE OR OBJECT IN
,,	excluding hardware or	(110)	held		Booklight (soor window)		ENVIRONMENT
	armrests	(174)			Backlight (rear window)		
(052)		(1/4)	Air bag-driver side and object	(302)	Backlight storage rack,	(551)	
	Left side hardware or armrest	(475)	in mouth		door, etc.	(598)	Other vehicle or object
	Left A (A1/A2)-pillar	(175)	Air bag compartment	(303)	Other rear object (specify):		(specify):
(054)	Left B-pillar	/4 ====	cover-driver side		<del></del>	.=	
055)	Other left pillar (specify):	(176)	Air bag compartment		_	(599)	Unknown vehicle or object
			cover-driver side and eyewear	ADAP'	TIVE (ASSISTIVE) DRIVING		
	Left side window glass	(177)	Air bag compartment	EQUIP	MENT	NON	CONTACT INJURY
057)	Left side window frame		cover-driver side and jewelry	(401)	Hand controls for	(601)	Fire in vehicle
058)	Left side window sill	(178)	Air bag compartment		braking/acceleration	(602)	Flying glass
(059)	Left side window glass		cover-driver side and object	(402)	Steering control devices	(603)	Other noncontact injury
	including one or more of the		held		(attached to OEM steering		source
	following: frame, window sill,	(179)	Air bag compartment		wheel)		(specify):
	A (A1/A2)-pillar, B-pillar, or		cover-driver side and object in	(403)	Steering knob attached to	(604)	
	roof side rail.		mouth		steering wheel	(697)	Injured, unknown source
060)	Other left side object	(180)	Air bag-passenger side	(405)	Replacement steering wheel	,30.)	, 2. 22, 2
•	(specify):	(181)	Air bag-passenger side and	, <b>.</b> ,	(i.e., reduced diameter)		
		(,	eyewear	(406)	Joy stick steering controls		
		(192)	Air bag-passenger side and				
		(182)		(407)	Wheelchair tie-downs		
olCu+	SIDE		jewelry	(408)	Modification to seat belts,		
RIGHT			•		4		
	Right side interior surface,		•		(specify):		
(101)	Right side interior surface, excluding hardware or		,	(409)	(specify):Additional or relocated		
(101)	Right side interior surface,		•	(409)			





	OFFICIAL INJURY DAT	A — SKELETAL INJURIES	
Restrained?			
No	dicate the Location, Specific Anatomic Structure, Detail (size, depth, fracti	ure type, head injury clinical signs and neurological deficits), and	
Yes	ource of all injuries indicated by official sources (or from PAR or other uno navailable.)	ilicial sources if medical fecords and interviewee data are	
Blood Alcohol Level (mg/dl)			
BAL =	0000		
Glasgow Coma Scale Score			
GCSS =			
Units of Blood Given			
Units =			
Arterial Blood Gase			
pH =			
PO <sub>2</sub> =			
PCO <sub>2</sub>	\\\ <i>V // l</i>	\\\  ) ///	
нсо,	\\\\\/\/	V. V. V	
	\ <b>\</b> \ (\) <b>(</b> (\)	$(M \land M)$	
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	<b>LILL</b>		





National Highway Traffic Safety Administration

# GENERAL VEHICLE FORM NATIONAL ACCIDENT SAMPLING SYSTEM

		CRASHWUK I HINESS DATA STSTEM
1. F	Primary Sampling Unit Number	12. Speed Limit
2. C	Case Number - Stratum <u>AB</u> 1 7	(000) No statutory limit Code posted or statutory speed limit
3. V	/ehicle Number <u>4</u> 2	in kmph (999) Unknown
	VEHICLE IDENTIFICATION	$55 \text{ mph } \times 1.6093 = 489 \text{ kmph}$
5. V	/ehicle Model Year Code the last two digits of the model year 99) Unknown /ehicle Make (specify):	13. Police Reported Alcohol Presence For Driver (0) No alcohol present (1) Yes alcohol present (7) Not reported (8) No driver present (9) Unknown
6. V A N E	ASS Data Collection, Coding and Editing Manual.  99) Unknown  (ehicle Model (specify):  LESABRE  Applicable codes are found in your IASS Data Collection, Coding and Editing Manual.	14. Alcohol Test Result For Driver Code actual value (decimal implied before first digit—0.xx) (95) Test refused (96) None given (97) AC test performed, results unknown (98) No driver present (99) Unknown
·	999) Unknown	Source: WHO FROM ER PASSED TO OFFICE
Ν	dody Type $\phi 4$ lote: Applicable codes may be found on the back of this page.	15. Police Reported Other Drug Presence For Driver (0) No other drug(s) present
8. V	ehicle Identification Number	(1) Yes other drug(s) present (7) Not reported (8) No driver present
1 Lo N		<ul> <li>(8) No driver present</li> <li>(9) Unknown</li> <li>16. Other Drug Specimen Test Result For Driver</li> <li>(0) No specimen test given</li> <li>(1) Drug(s) not found in specimen</li> </ul>
(0	ehicle Special Use (This Trip)  No special use	(2) Drug(s) found in specimen, (specify):  (3) Specimen test given, results unknown or not
(2	l) Taxi 2) Vehicle used as school bus 3) Vehicle used as other bus 4) Military	obtained (8) No driver present (9) Unknown if specimen test given
(5	i) Police i) Ambulance	17. Driver's Zip Code
8)	7) Fire truck or car 8) Other (specify): 9) Unknown OFFICIAL RECORDS	(00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99998) No driver present (99999) Unknown
	OTTIONE RESORDS	(
(0 (1 (9 11. Po C le (1	olice Reported Vehicle Disposition  Not towed due to vehicle damage  Towed due to vehicle damage  Unknown  olice Reported Travel Speed  ode to the nearest kmph (NOTE: 000 means  ses than 0.5 kmph)  1000 Linknown	18. Driver's Race/Ethnic Origin (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (7) Other (specify):
(9 	999) Unknown mph X 1.6093 = kmph	(8) No driver present (9) Unknown

# **CODES FOR BODY TYPE**

#### CDS APPLICABLE VEHICLES

#### **Automobiles**

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify):
- (09) Unknown automobile type

#### Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

#### Utility Vehicles (≤ 4,500 kgs GVWR)

- (14) Compact utility (Jeep CJ-2 CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

#### Van Based Light Trucks (≤ 4,500 kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van (≤ 4,500 kgs GVWR)
- (23) Van based motorhome ( 4,500 kgs GVWR)
- (24) Van based school bus (≤ 4,500 kgs GVWR)
- (25) Van based other bus (≤ 4,500 kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify):
- (29) Unknown van type

#### 

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsur/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)

- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

#### Other Light Trucks (≤ 4,500 kgs GVWR)

- (40) Cab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

#### **OTHER VEHICLES**

#### Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify):
- (59) Unknown bus type

#### Medium/Heavy Trucks (> 4,500 kgs GVWR)

- (60) Step van (> 4,500 kgs GVWR)
- 61) Single unit straight truck (4,500 kgs < GVWR ≤ 8,850 kgs)
- (62) Single unit straight truck (8,850 kgs < GVWR ≤ 12,000 kgs)
- (63) Single unit straight truck (> 12,000 kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

# Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify):\_\_\_\_\_
- (89) Unknown motored cycle type

#### Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type

	PRECRASH ENVIRONMENTAL DATA	25	Roadway Surface Condition	ı
40	Relation To Interchange Or Junction $\psi$	23.	(1) Dry	<del></del>
19.			(2) Wet	
	<ul><li>(0) Non-interchange area and non-junction</li><li>(1) Interchange area related</li></ul>	1	(3) Snow or slush	
	(1) interchange area related		(4) Ice	
	Non-Interchange junctions		(5) Sand, dirt, or oil	
	(2) Intersection related	1	(8) Other (specify):	
	(3) Driveway, alley access related		(9) Unknown	
	(4) Other junction (specify)			
		26	Light Conditions	(
	(5) Unknown type of junction	20.	(1) Daylight	
			(2) Dark	
	(9) Unknown		(3) Dark, but lighted	
			(4) Dawn	
	T (C T)		(5) Dusk	
20.	Trafficway Flow $\phi$		(9) Unknown	
	(0) Not physically divided (two way traffic)			
	(1) Divided trafficway-median strip without positive barrier			4
		27.	Atmospheric Conditions	Ψ_
	<ul><li>(2) Divided trafficway-median strip with positive barrier</li><li>(3) One way traffic</li></ul>		(0) No adverse atmospheric-related driving	
	(9) Unknown		conditions	
	(O) CHRIOWII		(1) Rain	
	2		(2) Sleet/hail	
	Number Of Travel Lanes		(3) Snow	
	(1) One		(4) Fog (5) Rain and fog	
	(2) Two		(6) Sleet and fog	
	(3) Three (4) Four		(7) Other (e.g., smog, smoke, blowing sand or	dust
	(5) Five		etc.) (specify):	auot,
	(6) Six		(9) Unknown	
	(7) Seven or more			
	(9) Unknown	28.	Traffic Control Device	_Φ_
			(0) No traffic control(s)	
22	Donadourou Alimono and		(1) Traffic control signal (not RR crossing)	
	Roadway Alignment (1) Straight		-	
	(1) Straight (2) Curve right		Regulatory	
	(3) Curve left		(2) Stop sign	:
	(9) Unknown		<ul><li>(3) Yield sign</li><li>(4) School zone sign</li></ul>	
	(-,		(5) Other regulatory sign (specify):	
22	D		(b) Guiler regulatory sign (specify).	
	Roadway Profile (1) Level		(6) Warning sign (not RR crossing)	
	(1) Levei (2) Uphill grade (>2%)		(7) Unknown sign	
	(3) Hill crest		(8) Miscellaneous/other controls including RR	
	(4) Downhill grade (>2%)		controls (specify):	
	(5) Sag			
	(9) Unknown		(9) Unknown	
	` '			
24	Pandway Surface Time 2	20	Traffic Control Davis Const.	<b>A</b>
	Roadway Surface Type (1) Concrete	<b>29</b> .	Traffic Control Device Functioning	<u> </u>
	(1) Concrete (2) Bituminous (asphalt)		<ul><li>(0) No traffic control device</li><li>(1) Traffic control device not functioning</li></ul>	
	(3) Brick or block		(specify)	
	(4) Slag, gravel, or stone	•	(300011)	
	(5) Dirt	•	(2) Traffic control device functioning properly	
	(8) Other (specify):		(9) Unknown	
	(9) Unknown		• •	

	DE	ACCRACH DRIVER DELATED DATA		
	PF	RECRASH DRIVER RELATED DATA		Vehicle Traveling
30	Drive	er's Distraction/Inattention To Driving 9 7	(10)	Over the lane line on left side of travel lane
<b>.</b>		or To Recognition Of Critical Event)	(11)	Over the lane line on right side of travel lane
	(00)	No driver present	(12)	Off the edge of the road on the left side
	(01)	Attentive or not distracted	(13)	Off the edge of the road on the right side End departure
	(02)	Looked but did not see	(15)	Turning left at intersection
		Distractions	116	Turning right at intersection
	(03)	By other occupant(s), (specify):	1 7	Crossing over (passing through) intersection
	(0.4)		(18)	This vehicle decelerating
	(04)	By moving object in vehicle (specify):	(19)	Unknown travel direction
	(05)	While talking or listening to cellular phone (specify	` ′	
	(00)	location and type of phone):		r Motor Vehicle In Lane
		resolution and type of phones.	(50)	Other vehicle stopped
	(06)	While dialing cellular phone (specify location and	(51)	Traveling in same direction with lower steady
	` '	type of phone):	(50)	speed
			(52)	Traveling in same direction while decelerating
	(07)	While adjusting climate controls		Traveling in same direction with higher speed Traveling in opposite direction
	(08)	While adjusting radio, cassette, CD (specify):		In crossover
	(00)			Backing
	(09)	While using other device/object in vehicle (specify):	(59)	Unknown travel direction of other motor vehicle in
	(10)	Sleepy or fell asleep	l ` ′	lane
		Distracted by outside person, object, or event		
	( ' ')	(specify):		r Motor Vehicle Encroaching Into Lane
		(Specify).	(60)	From adjacent lane (same direction)—over left
	(12)	Eating or drinking		lane line
	(13)	Smoking related	(61)	From adjacent lane (same direction)—over right
	(97)	Distracted/inattentive, details unknown	(00)	lane line
		Other, distraction (specify):	(62)	From opposite direction—over left lane line
				From opposite direction—over right lane line
	(99)	Unknown	(65)	From parking lane From crossing street, turning into same direction
31.	Pre-E	Event Movement (Prior to 4 /	(66)	From crossing street, across path
	Reco	gnition of Critical Event)	(67)	From crossing street, turning into opposite
	(00)	No driver present	(0.,	direction
	(01)	Going straight	(68)	From crossing street, intended path not known
	(02)	Decelerating in traffic lane	(70)	From driveway, turning into same direction
	(03)	Accelerating in traffic lane	(71)	From driveway, across path
	(04)	Starting in traffic lane	(72)	From driveway, turning into opposite direction
	(05)	Stopped in traffic lane	(73)	From driveway, intended path not known
	(00)	Passing or overtaking another vehicle Disabled or parked in travel lane	(74)	From entrance to limited access highway
	(08)	Leaving a parking position	(78)	Encroachment by other vehicle—details unknown
	(09)	Entering a parking position	Dede	estrian Padalovolist or Other Nonmotorist
	(10)	Turning right	(80)	estrian, Pedalcyclist, or Other Nonmotorist  Pedestrian in roadway
	(11)	Turning left	3	Pedestrian approaching roadway
		Making a U-turn		Pedestrian—unknown location
	(13)	Backing up (other than for parking position)		Pedalcyclist or other nonmotorist in roadway
		Negotiating a curve		(specify):
		Changing lanes	(84)	Pedalcyclist or other nonmotorist approaching
	(16)	Merging		roadway, (specify):
		Successful avoidance maneuver to a previous	(85)	Pedalcyclist or other nonmotorist—unknown
		critical event Other (specify):		location (specify):
	(91)	Other (Specify).	Ohio	at an Animal
	(99)	Unknown		ct or Animal
	(33)			Animal in roadway Animal approaching roadway
2	Critic	al Precrash Event / $\phi$	(80)	Animal—unknown location
		Vehicle Loss of Control Due To:		Object in roadway
		Blow out or flat tire		Object in roadway Object approaching roadway
	(02)	Stalled engine		Object—unknown location
	(03)	Disabling vehicle failure (e.g., wheel fell off)		Other critical precrash event (specify):
		(specify):	(55)	- man to a support (abase)).
	(04)	Non-disabling vehicle problem (e.g., hood flew up)	(99)	Unknown
	<b></b>	(specify):	' '	
		Poor road conditions (puddle, pot hole, ice, etc.)		
	(06)	(specify):		
	(D8)	Traveling too fast for conditions Other cause of control loss (specify):		
	(00)	outer cause or control loss (specify).		

(09) Unknown cause of control loss

33. Attempted Avoidance Maneuver (00) No driver present (01) No avoidance maneuver (02) Braking (no lockup) (03) Braking (lockup) (04) Braking (lockup unknown) (05) Releasing brakes (06) Steering left (07) Steering right (08) Braking and steering left (09) Braking and steering right (10) Accelerating (11) Accelerating and steering left (12) Accelerating and steering right (98) Other action (specify):	35. Pre-Impact Location (0) No driver present (1) Stayed in original travel lane (2) Stayed on roadway but left original travel lane (3) Stayed on roadway, not known if left original travel lane (4) Departed roadway (5) Remained off roadway (6) Returned to roadway (7) Entered roadway (9) Unknown  36. Accident Type (Note: Applicable codes on back of this page) (00) No impact Code the number of the diagram that best describes the accident circumstance
34. Pre-Impact Stability  (0) No driver present  (1) Tracking  (2) Skidding longitudinally—rotation less than 30 degrees  (3) Skidding laterally—clockwise rotation  (4) Skidding laterally—counterclockwise rotation  (7) Other vehicle loss-of-control (specify):  (9) Precrash stability unknown	(98) Other accident type (specify): (99) Unknown

STOP HERE IF GV07 DOES NOT EQUAL 01 - 49

Natio	onal Accident Sampling System-Crashworthiness Dat	a System: General Venicle Form	Page 5
	OCCUPANT RELATED	44. Vehicle Cargo Weight 9, 99	0
37.	Driver Presence in Vehicle (0) Driver not present	Code weight to nearest 10 kilograms.	
	(1) Driver present	(000) Less than 5 kilograms (450) 4,500 kilograms or more	}
	(9) Unknown	(999) Unknown	
38.	Number of Occupants This Vehicle 4 1	kgs	
	(00-96) Code actual number of occupants for this vehicle	Source:	-
	(97) 97 or more	ROLLOVER DATA	
	(99) Unknown	45. Rollover (no overturning) φ	<u>q</u>
39.	Number of Occupant Forms Submitted	Rollover (primarily about the longitudinal axis)	
	AIR BAG RELATED	(01-16) Code the number of quarter turns	., .
40.	Is this an AOPS Vehicle?	(17) Rollover, 17 or more quarter turns (spec	•
	(0) No (includes unknown) (1) Yes - researcher determined	(98) Rollover-end-over-end (i.e., primarily a the lateral axis)	bout
	(2) VIN determined air bag system	(99) Rollover (overturn), details unknown	
	<ul> <li>(3) VIN determined automatic (passive) belts</li> <li>(4) VIN determined air bag and automatic (passive)</li> </ul>	46. Rollover Initiation Type Φ	q
	belts	(00) No rollover (01) Trip-over	
41.	Air Bag(s) Deployment, First Seat Frontal $(0)$ Not equipped or not available	(02) Flip-over	
	(1) No air bags deployed	(03) Turn-over (04) Climb-over	
	Single Air Bag Vehicle (2) Driver air bag deployed	(05) Fall-over (06) Bounce-over	
	Driver air bag deployed     Driver air bag, unknown if deployed	(07) Collision with another vehicle	
	Multiple Air Bag Vehicle	(08) Other rollover initiation type specify):	
	(4) Driver side only deployed (5) Passenger side only deployed	(98) Rolloverend-over-end (99) Unknown rollover initiation type	_
	(6) Driver and passenger side deployed (7) Driver and passenger side unknown if	••	a
	deployed	47. Location of Rollover Initiation (0) No rollover	<u>\$</u>
	(8) Air bag(s) deployed, details unknown (9) Unknown	(1) On roadway (2) On shoulder—paved	
42	Air Bag(s) Deployment, Other Than First Ψ	(3) On shoulder—unpaved	
	Seat	<ul> <li>(0) No rollover</li> <li>(1) On roadway</li> <li>(2) On shoulder—paved</li> <li>(3) On shoulder—unpaved</li> <li>(4) On roadside or divided trafficway median</li> <li>(8) Rollover—end-over-end</li> <li>(9) Unknown</li> </ul>	
	Frontal (0) Not equipped with an "other" air bag	(9) Unknown	
	(1) Deployed during accident (as a result of impact)	48. Rollover Initiation Object Contacted $-\Phi$	φ_
	(3) Deployed, details unknown	(Note: Applicable codes on back of page)	
	(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion,	49. Location on Vehicle Where Initial Principal	4
	electrical)	Tripping Force Is Applied (0) No rollover	
	(7) Nondeployed	(1) Wheels/tires (2) Side plane	
	(9) Unknown	(3) End plane	
	Specify type of "other" air bag present:	(2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify):	
		(6) Non-contact rollover forces (specify):	_
	V5.1101 =	(8) Rolloverend-over-end	_
	VEHICLE WEIGHT ITEMS	(9) Unknown	
43	. Vehicle Curb Weight 1 6 4 0	50. Direction of Initial Roll (0) No rollover	4
	Code weight to nearest  10 kilograms.	(1) Roll right - primarily about the longitudinal:	axis
	(045) Less than 450 kilograms	(2) Roll left - primarily about the longitudinal at (8) Rollover-end-over-end	(IS
	(610) 6,100 kilograms or more (999) Unknown	(9) Unknown roll direction	
	3614 lbs X .4536 = $149$ kgs		
	Source:		

# **CODES FOR ROLLOVER INITIATION OBJECT CONTACTED**

(00) No rollover (01-30) — Vehicle Number	(57) Fence (58) Wall
Noncollision	(59) Building (60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(32) No rollover impact initiation (end-over-end)	(62) Fire hydrant
(34) Jackknife	(63) Curb
(OT) GUORRIMO	(64) Bridge
Collision With Fixed Object	(68) Other fixed object (specify):
(41) Tree (≤ 10 cm in diameter)	(00) Other lixed object (specify).
(42) Tree (> 10 cm in diameter)	(69) Unknown fixed object
(43) Shrubbery or bush	(09) Offictiowit lixed object
(44) Embankment	Callinian with Nantiural Object
(44) Embankment	Collision with Nonfixed Object
(AE) Proglement note or next (any diameter)	(70) Passenger car, light truck, van, or other vehicle
(45) Breakaway pole or post (any diameter)	not in-transport
Nambra discussi Dala as Dant	(71) Medium/heavy truck or bus not in-transport
Nonbreakaway Pole or Post	( <u>76</u> ) Animal
<ul><li>(50) Pole or post (≤ 10 cm in diameter)</li><li>(51) Pole or post (&gt; 10 cm but ≤ 30 cm in diameter)</li></ul>	(77) Train
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)	(78) Trailer, disconnected in transport
(52) Pole or post (> 30 cm in diameter)	(79) Object fell from vehicle in-transport
(53) Pole or post (diameter unknown)	(88) Other nonfixed object (specify):
(54) Concrete traffic barrier	(89) Unknown nonfixed object
(55) Impact attenuator	
(56) Other traffic barrier (includes guardrail) (specify):	(98) Other event (specify):
	(99) Unknown event or object

OVERRIDE/UNDERRIDE (THIS VEHICLE)	ACCIDENT RECONSTRUCTION PROGRAMS
51. Front Override/Underride (this Vehicle)	HIGHEST DELTA V
52. Rear Override/Underride (this Vehicle)  (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride	58. Basis for Total (Resultant) Delta V (highest)  (00) No vehicle inspection
Override (see specific CDC)  [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)]  (1) 1st CDC  (2) 2nd CDC  (3) Other not automated CDC (specify):	Delta V Calculated (01) Reconstruction program -damage only routine (02) Reconstruction program -damage and trajectory routine (03) Missing vehicle algorithm
Underride (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):	Delta V Not Calculated  (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.
<ul> <li>(7) Medium/heavy truck or bus override (of any configuration)</li> <li>(9) Unknown</li> <li>HEADING ANGLE AT IMPACT FOR</li> </ul>	All vehicles within scope (CDC applicable) of reconstruction program but one of the collision conditions is beyond the scope of the reconstruction
HIGHEST DELTA V	<ul> <li>program or other acceptable reconstruction technique, regardless of adequacy of damage data.</li> </ul>
Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown  53. Heading Angle For This Vehicle  FECONSTRUCTION DATA  55.Towed Trailing Unit (0) No towed unit (1) Yes—towed trailing unit (9) Unknown	(05) Rollover (06) Other non-horizontal forces (07) Sideswipe type damage (08) Severe override (09) Yielding object (10) Overlapping damage (11) All vehicle and collision conditions are within scope of one of the acceptable reconstruction programs, but there is insufficient data available,  (98) Other, (specify):
<ul> <li>56. Documentation of Trajectory Data for This Vehicle</li> <li>(0) Nο</li> <li>(1) Yes</li> </ul>	
57 Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify):  (9) Unknown	

COMPUTER GENERAT	ED CRASH SEVERITY
59. Total Delta V  90.5  Nearest kmph (highest)  Nearest kmph (secondary)  (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown  Highest  60. Longitudinal Component of Delta V  99.1	63. Impact Speed Nearest kmph (highest)Nearest kmph (secondary)  (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (998) Trajectory algorithm not run (999) Unknown
Nearest kmph (highest)  Nearest kmph (secondary)  (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (999) Unknown  Highest  61. Lateral Component of Delta V	64. Confidence In Reconstruction Program Results (For Highest Delta V) (0) No reconstruction (1) Collision fits model — results appear reasonable (2) Collision fits model — results appear high (3) Collision fits model — results appear low (4) Borderline reconstruction — results appear reasonable
// Nogroot kmph (highoot)	DIBER SPEED ESTUMATE
Nearest kmph (highest)  Nearest kmph (secondary)  (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph)  (±160) ±159.5 kmph and above (_999) Unknown  62. Energy Absorption	OTHER SPEED ESTIMATE  Highest  65. Barrier Equivalent Speed  73.3  Nearest kmph (highest)  Nearest kmph (secondary)  (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown

IS MISSING VEHICLE ALGORITHM APPLICABLE FOR THIS VEHICLE? [] YES [] NO

IF YES: IS A COMPLETED PROGRAM SUMMARY INCLUDED? [] YES [] NO

66. Estimated Highest Delta V (Researcher Determined) (0) Reconstruction Delta V coded  Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph (5) ≥ 55 kmph  Other estimates of damage severity (6) Minor (7) Moderate (8) Severe	ESTIMATED DELTA V	VEHICLE INSPECTION
(a) Olikilowii	Determined) (0) Reconstruction Delta V coded  Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph (5) ≥ 55 kmph  Other estimates of damage severity (6) Minor (7) Moderate	(0) No inspection (1) Vehicle fully repaired-no damage evident (2) Partial inspection (specify):

\*\*\* IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67=0), \*\*\*

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS

\*\*\* IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE \*\*\*

THE EXTERIOR VEHICLE, INTERIOR VEHICLE,

OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.

# **OCCUPANT ASSESSMENT FORM**

ational Highway Traffic Safety Iministration	NATIONAL ACCIDENT SAMPLING SYSTEM  CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum <u>AB 17</u>	10. Occupant's Seat Position
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month):  (97) 97 years and older (99) Unknown  6. Occupant's Sex (1) Male	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant  Third Seat (31) Left side (32) Middle
(2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	(33) Right side (34) Other (specify): (35) On or in the lap of another occupant  Fourth Seat (41) Left side (42) Middle (43) Right side
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknowninches X 2.54 =centimeters	(44) Other (specify):(45) On or in the lap of another occupant  (97) In or on unenclosed area (98) Other seat (specify):(99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 = kilograms  9. Occupant's Role	11. Occupant's Posture (0) Normal posture  Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat
(1) Driver (2) Passenger (9) Unknown	<ul> <li>(4) Sitting sideways or turned to talk with another occupant or to look out a rear window</li> <li>(5) Sitting on a console</li> <li>(6) Lying back in a reclined seat position</li> <li>(7) Bracing with feet or hands on a surface in front of seat</li> <li>(8) Other abnormal posture (specify):</li> <li>(9) Unknown</li> </ul>

EJECTION/ENTRAPMENT				
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	<u> </u>	15. Medium Status (Immediately Prior To Impact)  (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown		
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	<u>\$</u>	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):  (9) Unknown  17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or	_	
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):  (5) Integral structure (8) Other medium (specify):  (9) Unknown	<u>φ</u> - -	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown		

	BELT SYSTEM FUNCTION				
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt			
	(4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed	Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown			
	(6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	<ul> <li>(9) Unknown if position has adjustable upper anchorage adjustment</li> <li>23. Automatic (Passive) Belt System Availability/</li> </ul>			
19.	(9) Unknown  Manual (Active) Belt System Use (00) None used, not available, or belt	Function (0) Not equipped/not available (1) 2 point automatic belts			
	removed/destroyed (01) Inoperative (specify):	(2) 3 point automatic belts (3) Automatic belts - type unknown  Non-functional (4) Automatic belts destroyed or rendered			
	(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown	<ul> <li>(4) Automatic belts destroyed or rendered inoperative</li> <li>(9) Unknown</li> <li>24. Automatic (Passive) Belt System Use</li> </ul>			
	(08) Other belt used (specify): (12) Shoulder belt used with child safety seat	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually			
	<ul> <li>(13) Lap belt used with child safety seat</li> <li>(14) Lap and shoulder belt used with child safety seat</li> <li>(15) Belt used with child safety seat—type unknown</li> </ul>	disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown			
	(18) Other belt used with child safety seat (specify): (99) Unknown if belt used	(9) Unknown  25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system			
20.	Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly	(2) Motorized system (9) Unknown			
	<ul> <li>(2) Belt used properly with child safety seat</li> <li>Belt Used Improperly</li> <li>(3) Shoulder belt worn under arm</li> <li>(4) Shoulder belt worn behind back or seat</li> <li>(5) Belt worn around more than one person</li> </ul>	26. Proper Use of Automatic (Passive)  Belt System  (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat			
	(6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):	Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than			
	(8) Other improper use of manual belt system (specify):	one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or			
21	(9) Unknown  Manual (Active) Belt Failure Modes	automatic shoulder belt used improperly			
	During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not	with child safety seat (specify):  (8) Other improper use of automatic belt system (specify):  (9) Unknown			
	included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):	27. Automatic (Passive) Belt Failure Modes  During Accident (0) Not equipped/not available/not in use			
	(6) Broken retractor (7) Combination of above (specify):	<ul> <li>(1) No automatic belt failure(s)</li> <li>(2) Torn webbing (stretched webbing not included)</li> <li>(3) Broken buckle or latchplate</li> <li>(4) Upper anchorage separated</li> <li>(5) Other anchorage separated (specific)</li> </ul>			
	(8) Other manual belt failure (specify):  (9) Unknown	<ul> <li>(5) Other anchorage separated (specify):</li> <li>(6) Broken retractor</li> <li>(7) Combination of above (specify):</li> </ul>			
	·	(8) Other automatic belt failure (specify):  (9) Unknown			

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use  (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag  Non-functional (2) Air bag disconnected (specify):  (3) Air bag not reinstalled (9) Unknown
<ul> <li>(9) Police indicated "unknown"</li> <li>29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"</li> </ul>	<ul> <li>31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown</li> </ul>
Check the Primary Source Used In Determining Belt Use.  [ ] Not equipped/not available/destroyed or rendered inoperative [ ] Vehicle inspection [ ] Official injury data [ ] Driver/occupant interview [ \( \vert \) Other (specify):     \( \earla \) \( \e	<ul> <li>Other Than First Seat Frontal Air Bag     Availability/Function     (This Occupant     Position)     (0) Not equipped/not available     (1) Air bag  Non-functional     (2) Air bag disconnected (specify):  (3) Air bag not reinstalled     (9) Unknown     Specify type of *other* air bag present:</li> </ul>
	<ul> <li>33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)</li> <li>(0) Not equipped with an "other" air bag</li> <li>(1) Deployed during accident (as a result of impact)</li> <li>(2) Deployed inadvertently just prior to accident</li> <li>(3) Deployed, details unknown</li> <li>(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)</li> <li>(5) Unknown if deployed</li> <li>(7) Nondeployed</li> <li>(9) Unknown</li> </ul>
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

	FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
	Had Vehicle Been in Previous Accident(s)?  (0) Not equipped/not available (1) No previous accidents  Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of  Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
	Type of Air Bag  (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	<ul> <li>41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?</li> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes</li> <li>(3) Deployed, unknown if flap(s) opened at designated tear points</li> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> </ul>
	Had Any Prior Maintenance/Service  Been Performed On This Air Bag System?  (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify):  (9) Unknown	<ul> <li>42. Were Air Bag Module Cover Flap(s) Damaged?    (0) Not equipped/not available (1) No (2) Yes (specify):    (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed</li> </ul>
-	Air Bag Deployment Accident Event  Sequence Number (00) Not equipped/not available  Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown  43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged  Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
()	CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify):  (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify):  (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):  (9) Unknown  50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s)
45.	Was The Air Bag Tethered?  (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):  (3) Deployed, unknown if tethered	(06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):  (99) Unknown
	<ul> <li>(7) Not deployed</li> <li>(8) Unknown if deployed</li> <li>(9) Unknown</li> <li>Did The Air Bag Have Vent Ports?</li> <li>(0) Not equipped/not available</li> <li>(1) No</li> <li>(2) Yes (specify number of vent ports):</li> <li>(3) Deployed, unknown if vent ports present</li> </ul>	51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
<b>4</b> 7.	(7) Not deployed (8) Unknown if deployed (9) Unknown  Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify):	52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track  Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position
48.	(3) Deployed, unknown if other occupant contact to air bag (7) Not deployed (8) Unknown if deployed (9) Unknown  Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed	<ul> <li>(5) Seat between middle and rear most track positions</li> <li>(6) Seat at rear most track position</li> <li>(9) Unknown</li> </ul>
(	8) Unknown if deployed 9) Unknown	

#### HEAD RESTRAINT AND SEAT EVALUATION continued

9

#### 53. Seat Back Incline Prior and Post Impact

- (00) Occupant not seated or no seat
- (01) Not adjustable

#### Upright prior to impact

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

#### Slightly reclined prior to impact

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

#### Completely reclined prior to impact

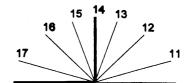
- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown

#### 54. Seat Performance (this Occupant Position)

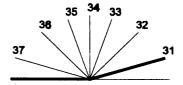
- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):

(7) Co	mbinatio	n of above	(specify)

- (8) Other (specify): \_\_\_
- (9) Unknown







	СНЦ	D SAF	FETY SEAT
55.	Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	φ	58. Child Safety Seat Harness Usage $\frac{\varphi}{\varphi}$ 59. Child Safety Seat Shield Usage $\frac{\varphi}{\varphi}$
56.	(998) Unknown make/model (999) Unknown if child safety seat used  Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify):  (8) Unknown child safety seat type (9) Unknown if child safety seat used	φ	Note: Options below applicable to Variables OA58-OA60. (00) No child safety seat  Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used  Designed With Harness/Shield/Tether (11) Harness/shield/tether not used
	Child Safety Seat Orientation (00) No child safety seat  Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify):  (09) Unknown orientation  Designed For Forward Facing for This Age/Weig (11) Rear facing (12) Forward facing (13) Other orientation (specify):  (19) Unknown orientation  Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify):  (19) Unknown orientation (29) Unknown orientation	<u>q</u>	(12) Harness/shield/tether used (19) Unknown if harness/shield/tether used  Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

INJURY CONSEQUENCES	
(0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown  62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):   Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):  (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Treatment)  (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):  (9) Unknown  64. Hospital Stay  (00) Not Hospitalized  Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown  65. Working Days Lost  Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
STOD WO	NRK HERE

**VARIABLES 66-74** 

TO BE CODED BY THE ZONE CENTER

### TO BE CODED BY THE ZONE CENTER

	INJURY CONSEQUENCES		TRAUMA DATA
1	Time to Death  Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60)  (00) Not fatal (96) Fatal - ruled disease (99) Unknown	<b>4</b> 4	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	Ist Medically Reported Cause of Death _	ф ф Ф Ф	72. Was the Occupant Given Blood?  (1) No - blood not given  (2) Yes - blood given  (specify units):
r ii t (	Brd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported njury(s) which reportedly contributed to his occupant's death O) Not fatal or no additional causes Hode of death given but specific injuries are not linked to cause of death. (specify):  Other result (includes fatal ruled	<u>ф</u>	73. Arterial Blood Gases (ABG) – HCO <sub>3</sub> <u>91</u> (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO <sub>3</sub> (96) ABGs reported, HCO <sub>3</sub> unknown (97) Injured, details unknown (99) Unknown if injured
	disease) (specify):		BELT USE DETERMINATION
70. N T 	Aumber of Recorded Injuries for This OccupantCode the actual number of njuries recorded for this occupant. 00) No recorded injuries 97) Injured, details unknown 99) Unknown if injured	91	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):



U.S. Department of Transportation National Highway Traffic Safety Administration

# CRASHPC PROGRAM SUMMARY NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Identifying Title	AB 17		<b>4</b> /		
Primary Sampling Unit	Case NoStratum		ccident Event equence No.	Date (Month, day, year) o	f Run
CRASHPC Vehicle Ide		_			
Vehicle 1	1994	PLYADO	174	VOYAGER	
Vehicle 2	1983	BUICK		LESABRE	
	Year	Make		Model	NASS Veh. No.
	GE	NERAL IN	FORMATION		
	VEHICLE I			VEHICLE 2	_
Size			Size		<u>#</u>
Weight # 487 +	= 4059 LB	s kg	Weight <u>3614</u> + <sup>≈</sup> 172	v <sub>+ = 378</sub>	6 kg
Curb Occupant(s) Ca	17g0 2 F Z E	W 7	Curb Occupan	nt(s) Cargo	EW6
PDOF (-180 to +180)	+ <u>-5</u>	•	PDOF (-180 to	+180) +	+10 .
Stiffness		41	Stiffness		4 9
	S	CENE INF	ORMATION		
Rest and Impact Positi					
	VEHICLE 1			VEHICLE 2	
Rest	x	m	Rest Position	х	m
Position	Υ	m	Posmon	Υ	m
	PSI	<del></del> •		PSI	· · · · · · · · · · · · · · · · · · ·
<u>Impact</u>	X	m	Impact Position	X	. m
Position	Υ	m	Position	Υ	m
	PSI	•		PSI	•
Slip Angle(-180 to +18	0)	°	Slip Angle (-18	0 to +180)	· · · · · · · · · · · · · · · · · · ·
		VEHICLE	MOTION		
Sustained Contact [ \	] No [ ] Yes VEHICLE 1			VEHICLE 2	
	<b>2000</b>		Vehicle Rotatio	n [	]No []Yes
/ehicle Rotation Rotation Stop Befo	[ ] No ore Rest [ ] No	[]Yes []Yes	Rotation St	***************************************	]No []Yes
End of Rotation Position	x	m	End of Rote Position		m
i osigori	Υ	m		r PSI	m
	PSI	•		***************************************	
Curved Path	[ ] No	[ ] Yes	Curved Path	7000000 - 100000000000000000000000000000	] No [ ] Yes
Point on Path			Point on Pa X		m
x	m Y	_ · m			
Rotation Direction Rotation >360° [ ]	[ ] None	1 ccm	200000000000000000000000000000000000000	ion [ ] None [ 0° [ ] No [ ] Yes	ICM [ ]CCM

National Accident Sampling System-Crashworthiness Data System: CRASHPC Program Summary

FRICTION IN	IFORMATION	TRAJECTOR	Y INFORMATION
Coefficient of Friction		Trajectory Data [ ] N	o []Yes
Rolling Resistance Option	•	if No, Go To Damage in	
		Vehicle 1 Steer Angles	
Vehicle 1 Rolling Resis	tance	<u> </u>	• RF •
LF	RF	LR	
LR	RR		
		Vehicle 2 Steer Angles	
Vehicle 2 Rolling Resis		LF	• RF •
	RF RR	LR	° RR °
		Terrain Boundary [ ]	No [ ] Yes
		First Point	
		Xm	Y m
		Second Point	
	3	X	Y m
		Secondary Coefficient of	Friction
	DAMAGE	INFORMATION	
VEHIC	CLE 1 INCLS	<b>₩</b> VE	HICLE 2
Damage Length	L63_1cm	Damage Length	L <b>70.</b> cm
Crush Depths	C,9.0cm	Crush Depths	c,22. ن <sub>cm</sub>
	C <sub>2</sub>	ace (as)	C <sub>2</sub> cm
AL' CIPECTOS)	C <sub>3</sub> <b>34</b> , <u>O</u> cm	53 M PHOLO	C <sub>3</sub> cm
	_ /2 _	. 438	
"(Ho"	C <sub>4</sub> cm	( FARA	C <sub>4</sub> cm
the de business	C <sub>5</sub> 52.0 cm	Crush Depths  53" Diese (Family 1985)	C <sub>5</sub> <u>51</u> cm
"(Ho4)"		(FBM	·
Damage Offset	C <sub>5</sub> 52.0 cm	(FBM) Damage Offset	C <sub>5</sub> <u>51</u> cm
	C <sub>5</sub> 52.0 cm C <sub>6</sub> 54.0 cm	Damage Offset	$C_6 = \frac{57}{67} cm$ $C_6 = \frac{67}{67} cm$
Damage Offset	C <sub>5</sub> 52.0 cm C <sub>6</sub> 54.0 cm	Damage Offset	C <sub>5</sub> <u>51</u> cm C <sub>6</sub> <u>67.</u> cm D <u>8.5</u> cm
	C <sub>5</sub> 52.0 cm C <sub>6</sub> 54.0 cm	Damage Offset	$C_5 = 57 \text{ cm}$ $C_6 = 07. \text{ cm}$ $D^{0} = 8.5 \text{ cm}$
Damage Offset  ETHIS COMMON VEAC	C <sub>5</sub> 52.0 cm C <sub>6</sub> 54.0 cm	Damage Offset	C <sub>5</sub> <u>51</u> cm C <sub>6</sub> <u>67.</u> cm D <u>8.5</u> cm
Damage Offset  Final Column 1990  Model Year:  Make:	C <sub>5</sub> 52.0 cm C <sub>6</sub> 54.0 cm	Damage Offset	C <sub>5</sub> <u>51</u> cm C <sub>6</sub> <u>67.</u> cm D <u>8.5</u> cm

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL(KPH)	LONG. (KPH)	LAT.(KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	84.4	-84.1	7.4	<b>-5.</b> 0
	VEH #2	90.5	-89.1	-15.7	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2:360010.6 JOULES

SUMMARY OF DAMAGE DATA	(* INDICATES DEFAULT VALUE)
VEHICLE # 1	VEHICLE # 2
TYPECATEGORY 5	TYPECATEGORY 4
STIFFNESSCATEGORY 7	STIFFNESSCATEGORY 4
WEIGHT 1841.2 KGS	WEIGHT 1717.3 KGS
CDC12FZEW7	CDC12FDEW6
L 158.0 CM.	L 177.8 CM.
C1 22.9 CM.	C1 55.9 CM.
C2 45.7 CM.	C2 48.3 CM.
C3 86.4 CM.	C3 76.2 CM.
C4 106.7 CM.	C4 101.6 CM.
C5 132.1 CM.	C5 144.8 CM.
C6 137.2 CM.	C6 170.2 CM.
D 20.6 CM.	D 21.6 CM.
RHO 1.00 *	RHO 1.00 *
ANG5.0 DEG.	ANG 10.0 DEG.
D' 39.0 CM.	D' 42.3 CM.
DIMENSION	S AND INERTIAL PROPERTIES

WT.	_	142.5	CM.	72	_	130.9	Cr1.
B1	=	160.0	CM.	B2	=	150.4	CM.
TR1	_	161.8	CM.	TR2	=	157.0	CM.
I1	=	481714.4	NEWT-SEC**2-CM	12	=	416061.	.5 NEWT-SEC**2-CM
M1	=	18.482	NEWT-SEC**2/CM	M2	=	17.239	NEWT-SEC**2/CM
XF1	=	258.6	CM.	XF2	=	251.0	CM.
XR1	=	-309.6	CM.	XR2	=	-289.6	CM.
YS1	=	101.3	CM.	YS2	=	97.8	CM.

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	52.5	-52.3	4.6	-5.0
, ,	VEH #2	56.2	-55.4	-9.8	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2:265494.6 FT-LB.

SUMMARY OF DAMAGE DATA (* VEHICLE # 1	INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 5 STIFFNESSCATEGORY 7 WEIGHT 4059.0 LBS. CDC12FZEW7 L 62.2 IN. C1 9.0 IN. C2 18.0 IN. C3 34.0 IN. C4 42.0 IN. C5 52.0 IN. C6 54.0 IN. D 8.1 IN. RHO 8.1 IN. RHO 1.00 ANG 15.4 IN.	TYPECATEGORY 4 STIFFNESSCATEGORY 4 WEIGHT
DIMENSIONS AND INE	ERTIAL PROPERTIES
A1 = 56.1 IN. B1 = 63.0 IN. TR1 = 63.7 IN. I1 = 42637.4 LB-SEC**2-IN M1 = 10.554 LB-SEC**2/IN XF1 = 101.8 IN. XR1 = -121.9 IN. YS1 = 39.9 IN.	A2 = 54.7 IN. B2 = 59.2 IN. TR2 = 61.8 IN. I2 = 36826.4 LB-SEC**2-IN M2 = 9.844 LB-SEC**2/IN XF2 = 98.8 IN. XR2 = -114.0 IN. YS2 = 38.5 IN.

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE T (DAMAGE) VEH #1 VEH #2	COTAL(MPH) 60.3 .0	LONG. (MPH) -60.1	LAT.(MPH) 5.3 .0	ANG. (DEG) -5.0 .0
---	--------------------------	----------------------	------------------------	--------------------------

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2: ... O FT-LB.

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
                                         VEHICLE # 2
          VEHICLE # 1
                                       TYPE-----CATEGORY 11 STIFFNESS---CATEGORY 0
TYPE-----CATEGORY 5
STIFFNESS---CATEGORY 7
WEIGHT----- 4059.0 LBS.
                                       WEIGHT----1000000.0 LBS.
                                       CDC----BARRIER
CDC-----12FZEW7
L------ 62.2
                                                       .0 IN.
            62.2 IN.
                                       C1-----
              9.0 IN.
                                                       .0 IN.
                                       C2----
C2----
             18.0 IN.
                                                       .0 IN.
C3----
                                      C3-----
                                                       .0 IN.
              34.0 IN.
                                       C4-----
C4-----
            42.0 IN.
                                                       .0 IN.
                                       C5----
              52.0 IN.
                                                       .0 IN.
                                       C6-----
C6----
              54.0 IN.
                                                       .0 IN.
                                       D-----
                                                       .0 IN.
D-----
              8.1 IN.
RHO-----
                                                     1.00
                                       RHO-----
              1.00
                                                      .0 DEG.
                                       ANG----
ANG-----
              -5.0 DEG.
                                       D'----
              15.4 IN.
                                                       .0 IN.
```

#### DIMENSIONS AND INERTIAL PROPERTIES

A1	=	56.1	IN.	<b>A</b> 2	=	50.0	IN.
B1	=	63.0	IN.	B2	=	50.0	IN.
TR1	=	63.7	IN.	TR2	=	50.0	IN.
I1	=	42637.	4 LB-SEC**2-IN	12	=26	00104000	.0 LB-SEC**2-IN
M1	128	10.554	LB-SEC**2/IN	M2	=26	00.104	LB-SEC**2/IN
XF1	=	101.8	IN.	XF2	=	50.0	IN.
XR1	***	-121.9	IN.	XR2	=	-50.0	IN.
YS1	=	39.9	IN.	YS2	=	50.0	IN.

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	97.0	-96.7	8.5	<b>-</b> 5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2: .0 JOULES

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
        VEHICLE # 1
                                   VEHICLE # 2
TYPE-----CATEGORY 5
STIFFNESS---CATEGORY 7
                                 TYPE----CATEGORY 11
                                 STIFFNESS---CATEGORY 0
                                 WEIGHT---- 453600.0 KGS
WEIGHT---- 1841.2 KGS
                                CDC----BARRIER
CDC-----12FZEW7
.0 CM.
                                 L-----
                                C1-----
                                              .0 CM.
                                C2-----
                                              .0 CM.
                                C3-----
                                              .0 CM.
C3----
           86.4 CM.
C4-----
                                              .0 CM.
                                C5----
                                              .0 CM.
                                 C6----
                                              .0 CM.
            20.6 CM.
                                 D-----
D-----
                                              .0 CM.
RHO----
                                 RHO-----
                                             1.00
           1.00
ANG-----
                                 ANG-----
                                             .0 DEG.
            -5.0 DEG.
           39.0 CM.
                                 D'----
                                              .0 CM.
```

#### DIMENSIONS AND INERTIAL PROPERTIES

<b>A</b> 1	=	142.5 CM.	<b>A</b> 2	= 127.0	CM.
B1	=	160.0 CM.	B2	= 127.0	CM.
TR1	==	161.8 CM.	TR2	= 127.0	CM.
I1	=	481714.4 NEWT-SEC**2-CM	1 12	=*****	* NEWT-SEC**2-CM
M1	=	18.482 NEWT-SEC**2/CM	M2	=4553.302	NEWT-SEC**2/CM
XF1	=	258.6 CM.	XF2	<b>=</b> 127.0	CM.
XR1	=	-309.6 CM.	XR2	= -127.0	CM.
YS1	=	101.3 CM.	YS2	= 127.0	CM.

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE (DAMAGE)	VEH #1 VEH #2	TOTAL(KPH) 73.3 .0	LONG. (KPH) -72.2 .0	LAT.(KPH) -12.7 .0	ANG. (DEG) 10.0 .0
ENERGY DISSIPATED	BY DAMAGE	E VEH#1:360010	.6 JOULES	VEH#2:	.0 JOULES

SUMMARY OF DAMAGE DATA (* : VEHICLE # 1	INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 4 STIFFNESSCATEGORY 4 WEIGHT 1717.3 KGS CDC12FDEW6	TYPECATEGORY 11 STIFFNESSCATEGORY 0 WEIGHT 453600.0 KGS * CDCBARRIER
L	L0 CM. * C10 CM. * C20 CM. * C30 CM. * C40 CM. * C50 CM. * C60 CM. * D0 CM. * RHO 1.00 * ANG0 DEG. *
D' 42.3 CM.  DIMENSIONS AND INE	D'0 CM. RTIAL PROPERTIES
A1 = 138.9 CM. B1 = 150.4 CM. TR1 = 157.0 CM. I1 = 416061.5 NEWT-SEC**2-CM M1 = 17.239 NEWT-SEC**2/CM XF1 = 251.0 CM. XR1 = -289.6 CM. YS1 = 97.8 CM.	A2 = 127.0 CM. B2 = 127.0 CM. TR2 = 127.0 CM. 12 =************* NEWT-SEC**2-CM M2 =4553.302 NEWT-SEC**2/CM XF2 = 127.0 CM. XR2 = -127.0 CM. YS2 = 127.0 CM.

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE (DAMAGE)	VEH #1 VEH #2	TOTAL (MPH) 45.6 .0	LONG. (MPH) -44.9 .0	LAT.(MPH) -7.9 .0	ANG. (DEG) 10.0 .0
ENERGY DISSIPATED	BY DAMAGE	VEH#1:265494	.6 FT-LB.	VEH#2:	.0 FT-LB.

SUMMARY OF DAMAGE DATA (* VEHICLE # 1	INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 4	TYPECATEGORY 11
STIFFNESSCATEGORY 4	STIFFNESSCATEGORY 0
WEIGHT 3786.0 LBS.	WEIGHT1000000.0 LBS. *
CDC12FDEW6	CDCBARRIER
L 70.0 IN.	L0 IN. *
C1 22.0 IN.	C10 IN. *
C2 19.0 IN.	C20 IN. *
C3 30.0 IN.	C30 IN. *
C4 40.0 IN.	C40 IN. *
C5 57.0 IN.	C50 IN. *
C6 67.0 IN.	C60 IN. *
D 8.5 IN.	D0 IN. *
RHO 1.00 *	RHO 1.00 *
ANG 10.0 DEG.	ANG0 DEG. *
D' 16.6 IN.	D'0 IN.
D' 10.0 IN.	D
DIMENSIONS AND INE	ERTIAL PROPERTIES
A1 = 54.7  IN.	A2 = 50.0  IN.
B1 = 59.2  IN.	B2 = 50.0  IN.
TR1 = 61.8 IN.	TR2 = 50.0 IN.
I1 = 36826.4 LB-SEC**2-IN	I2 =2600104000.0 LB-SEC**2-IN
M1 = 9.844  LB-SEC**2/IN	M2 =2600.104 LB-SEC**2/IN
XF1 = 98.8   IN.	XF2 = 50.0 IN.
XR1 = -114.0  IN.	XR2 = -50.0 IN.
YS1 = 38.5 IN.	YS2 = 50.0  IN.

## **DSI-95-AB-17**

# **Medical Records**

#### **DIAGNOSES:**

- 1. Blunt force trauma to head
  - A. Skull fracture
  - B. Atlanto-occipital dislocation
  - C. Subarachnoid hemorrhage and small subdural hemorrhage
  - D. Cerebral edema
  - E. Multiple streak hemorrhages of brain
- 2. Blunt force trauma to extremities with apparent fracture of left radius
- 3. Blunt force trauma to chest and abdomen, with repaired rupture of mid jejunum
  - 4. Abrasion and contusion of integument

#### OPINION:

Death is due to complications of multiple blunt force injuries.

CIRCUMSTANCES OF DEATH:

The decedent is a 6 year old white boy (date of birth:

who was a passenger in a vehicle which was involved in a traffic accident in Alamosa County and transported to Hospital. The decedent had suffered abdominal and head injuries. He was pronounced brain dead at 4:46 P.M. on the

Permission was granted for organ harvesting, which was

completed on the

#### IDENTIFICATION:

Identification was made visually by the decedent's mother at the hospital. Thirty-five mm. photographs and fingerprints are obtained.

CIRCUMSTANCES OF THE POSTMORTEM EXAMINATION:

A postmortem examination on the body of ' ols is performed at the coroner's Office beginning at 8:30 A.M. on the

#### GENERAL DESCRIPTION:

The donor name on the top of the pox is stamped

. The seals are broken and the contents are revealed to consist of a sealed styrofoam box sealed with red tape, and another piece of paper that indicates the donor name

the CORS number and describes the contents of the styrofoam box. The styrofoam box is opened to reveal two gray top tubes of light yellow fluid, an apparently empty lavender top tube, and three gray top tubes and one lavender top tube of what appears to be blood. These are taped and submitted to the Toxicology Laboratory per routine.

The body is unwrapped to reveal the body of a child consistent with the stated age. No clothing or effects are submitted with the body.

#### EVIDENCE OF MEDICAL INTERVENTION:

A vertical midline incision, sewn shut, extends from the sternal notch down to the symphysis pubis. From the xiphoid down to the pubis, there is evidence of at least one other laparotomy, with several punctate holes oriented along the incision, suggestive of old suture holes.

An intracranial pressure bolt is in place in the right frontal scalp.

The eyes have been taped shut with cloth tape.

Page 2 of 9 Disk #44-94

A nasogastric tube is in place in the right nostril, and an orotracheal tube is in place in the mouth.

A multilumen catheter is sutured in place in the right subclavian region.

Bilateral chest tubes are sutured in place on either side of the chest.

Intravascular lines are observed in the right antecubital fossa, lateral right wrist, and left side of the groin. There are additional needle punctures in the right forearm, left antecubital fossa, back of the left hand, and cutdown sites in the right and left medial ankles. The cutdown sites have been closed and covered with pressure bandages. There is a pressure bandage over the left groin line, which also covers a surgical incision which extends obliquely across the left groin. The right groin is covered with a pressure type bandage, which covers a 3 inch vertical incision which has been closed.

A Foley catheter is in place in the urethra.

A coroner's identification bracelet bearing the name is around the right wrist, and a tag around the right bears the decedent's name.

SCARS AND IDENTIFYING MARKS: None.

#### EXTERNAL EXAMINATION:

The body is that of a normally developed, apparently well nourished white boy who appears his stated age, is 66 pounds, and 50.5 pounds. The body is well preserved but not embalmed, is cold to touch and has been refrigerated. Rigidity is fully developed in all muscle groups. Lividity is not readily apparent.

Injuries will be described separately.

The brown, up to 1 inch long scalp hair is without balding or thinning. The facies is altered by injury, and is extensively swollen. The irides are brown. The conjunctivae and sclerae are edematous, with scattered petechial hemorrhages. The ear lobes are uncreased and unpierced. The nose does not grate upon palpation. The lips exhibit only superficial abrasions and scattered contusions intimately associated with medical appliances. The previously described oral airway is in the mouth, as well as another orogastric tube in place in the mouth. The trachea is in the midline. There is no palpable adenopathy in any of the major lymph node regions. The chest, apart from injury, is symmetric. The abdomen is soft, flat, free of masses. The genitalia are

those of a normal circumcised boy. Only one testicle is palpable within the edematous scrotum. The previously described Foley catheter is in place in the urethra. No secondary hair is developed.

The upper extremities are normally formed. All digits are present. A transcapillary oximeter is adherent to the tip of the right index finger. The fingernails are short, approximating the fingertips. None of the nails is torn. The left hand and forearm are markedly edematous, and exhibit scattered petechial type hemorrhages. There appears to be some crepitation around the distal left radius and ulna, particularly the radius, suggesting fracture. The lower extremities are normally formed. All digits are present. The back is essentially unremarkable. The anus is normal.

#### EXTERNAL EVIDENCE OF INJURY:

#### HEAD:

A fine, cloth weave type abrasion extends around the forehead obliquely, over an area 5.5 inches by 1.25 inches in dimension. Bruising is minimal. There is extensive purple periorbital discoloration and swelling on the left, and although there is dried clotted blood around the right ocular fissure, there is minimal swelling. Some of this same cloth weave abrasion is observed on the right eyelid. The face is rather asymmetric, with swelling of the left forehead and periorbital region, and right mandibular region. There is some fine brownish abrasion over the entire right cheek and chin, 3.5 inches in greatest dimension, and similar abrasion is observed in patches on the edge of the nose, left cheek, and left corner of the mouth. Faint reddish abrasion/contusion is observed in the same distribution. In some areas it appears to have an almost fine to coarse cloth weave pattern. There is some faint reddish contusion over the swollen right ear, while the left ear is essentially unremarkable. A patch of fine brushburn abrasion is on the lateral aspect of the right side of the neck 3 inches in greatest dimension, which is behind the right ear. There is rather extensive swelling associated with this.

#### EXTREMITIES:

Bruising with punctate abrasion extends over much of the right forearm and upper arm in patches up to 2.5 inches in size. In some areas there appears to be a petechial type appearance to the injuries. No definite pattern is noted. No fractures are palpated nor joint dislocations noted.

The right leg exhibits similar patchy bruises and punctate abrasions, in patches extending all along the anterior surfaces. On the anterior medial right thigh, the abrasion/contusions take

on some linear and angular configurations, although a definite pattern is not recognized. There is an older abrasion over the right knee, which appears to predate the predominant injuries. In addition to the bruises and abrasions noted, there may also be a needle puncture on the top of the right foot. There is a subungual hematoma involving the right great toe which extends out from under the nail. A faint pattern injury wraps around the back of the right upper leg, which is comprised of several very faint, vertical, linear abrasions spaced 1 cm. apart.

Similar patches of punctate abrasion, contusions and larger patches of purple-red bruising are observed all along the anterior, lateral and medial surfaces of the left leg, with only involvement of the posterior surface. The injuries minimal exhibit no discrete pattern. Again, there are abrasions on the left knee clustered over an area 1 inch, some of which appear to predate the predominance of injuries. No definite fractures are palpated nor joints dislocated. There are some linear abrasions extending obliquely across the posterior lateral left thigh.

In addition to the fractures on the left arm already described, there are extensive ecchymoses with petechial type change involving much of the left hand, with extensive swelling. pattern injuries are noted.

#### TRUNK:

are numerous patches of punctate abrasion/contusion, exhibiting an almost petechial type appearance, extending along much of the right side of the chest and abdomen, and in areas along the left chest, abdomen and left shoulder. Another isolated area is observed just below the neck. Within these superficial areas of injury are some deeper, red-brown abrasions, many of them oriented along the surgical incision, and may be iatrogenic. However, there is an almost rectangular appearing injury on the anterolateral right flank, 1.75 inches long and almost 0.5 inch wide, which exhibits along the posterior edge an almost cloth weave or ribbing type pattern. Below this is a curved, 0.75 inch abrasion. Below this is a patch of fine linear abrasion contusions extending over an area 2.5 inches in dimension. Some of the injuries resemble injuries that might be caused by an elasticized waistband; predominantly vertical, but not parallel fine linear There are extensive ecchymoses around the surgical incisions in both sides of the groin, but separate from that is a 1.5 inch area of purple-red to green bruising in the left lower abdominal quadrant. No pattern is apparent. A few patches of bruising wrap around the right side of the trunk and extend over an area 2.5 inches. There is another area of purple bruising over the sacrum.

INTERNAL EVIDENCE OF INJURY:

Subscalpular hemorrhage diffusely coats the frontal, parietal and part of the left temporal occipital scalp. A skull fracture extends from the left sphenoid wing, through the left frontal bone, and branches toward the midline but does not cross it. One posterior branch of this fracture extends into the coronal suture and sagittal suture, having very slight diastasis. Subarachnoid hemorrhage diffusely coats the brain, and a few cc. of subdural blood clot are observed over the left occipitoparietal brain. The brain is markedly softened, and is fixed in formalin for later sectioning.

The intracranial pressure bolt is admitted through a defect in the right side of the frontal skull. The atlanto-occipital ligaments, particularly on the left, are lacerated, causing a gaping 1 cm. hemorrhagic defect. The anterior ligaments are loosened, but not torn, and the right ligaments are only slightly torn, with only a slight degree of movement. The upper cervical cord is softened.

#### INTERNAL EXAMINATION:

The left chest tube is inserted in the 7th intercostal space, while the right is in the 6th intercostal space. A small amount of hemorrhage is observed.

The normal orientation of the bowel has been disrupted by organ harvesting. The heart lies loose within the right chest cavity, having been severed from its vascular attachments. The lungs are expanded, filling the chest cavity. Approximately 500 cc. of bloody fluid fill the common chest cavity. The diaphragms have been partially cut surgically. The bowel has been extensively loosened from its mesenteric attachments. The descending abdominal aorta, kidneys, liver and gallbladder, and adrenal glands are absent.

#### CARDIOVASCULAR SYSTEM:

The heart weighs 100 grams. The coronary arteries arise normally from their respective sinuses and course normally over the heart. Multiple sections reveal no evidence of disease. The epicardial surface exhibits fine petechial-like hemorrhagic contusions over most of its surface. On section, the myocardium is brown, free of injury or disease. The atrial and ventricular septa are intact. The valve leaflets are delicate, pliable and morphologically normal. The endocardium exhibits patchy subendocardial hemorrhage, but is otherwise unremarkable.

The aorta arises normally with a left arch. No traumatic injury is observed apart from iatrogenic change. The aorta stops at approximately the level of the diaphragm.

#### RESPIRATORY SYSTEM:

The distal end of the orotracheal tube is below the vocal cords but above the carina. The lungs are expanded, weighing 270 and 240 grams, right and left respectively. There are ovoid hemorrhages on the pleural surfaces of both lungs which correspond to suction ports from the chest tubes. On section, the subcrepitant, edematous and congested parenchyma is free of consolidation and emphysematous change throughout.

The pulmonary arteries are free of obstruction.

#### ENDOCRINE SYSTEM:

The pituitary gland is surrounded by hemorrhage. The thyroid gland and pancreas are grossly pale but otherwise unremarkable.

#### DIGESTIVE SYSTEM:

The distal end of the orogastric from the mouth is within the stomach. The nasal tube ends in the esophagus and appears to be an esophageal lead. The esophagus is otherwise empty, lined by a tan unremarkable mucosa. The stomach contains a few cc. of greenish mucus. The gastric mucosa exhibits a few punctate mucosal ulcerations, but is otherwise unremarkable. The duodenum exhibits patchy mucosal hemorrhage, particularly at the crests, but the luminal contents are tan to brown and watery, virtually blood free. An area of surgical repair is observed in the mid to distal jejunum, which repairs a transmural rent in the jejunum surrounded by a small amount of hemorrhage. The rent occupies approximately 1/3 of the circumference of the jejunum. A few patches of mucosal and muscular hemorrhage are observed in other areas of the bowel, and hemorrhage is observed along the outside of the ascending colon, but no other transmural bowel injuries are observed. The appendix is unremarkable.

#### HEPATOBILIARY SYSTEM:

The liver and gallbladder are absent.

#### GENITOURINARY SYSTEM:

The kidneys are absent. The bladder contains the distal end of the Foley catheter but no urine. The bladder mucosa is tan and unremarkable. The prostate is tan, rubbery and grossly unremarkable.

Some hemorrhage is observed along both spermatic cords, but the testes are tan, rubbery, and grossly normal for age.

## RETICULOENDOTHELIAL SYSTEM:

The spleen is absent.

The exposed lymph nodes are pale but not enlarged.

The exposed bone marrow is red-brown and grossly unremarkable.

#### NECK:

There is extensive hemorrhage observed along the right side of the neck and a smaller amount along the left side of the neck. The hyoid bone is mobile but not fractured. The laryngeal cartilages are intact. The lumen is unobstructed.

#### MUSCULOSKELETAL SYSTEM:

A few patches of hemorrhage are observed along the diaphragm which has been previously partially cut. The musculature is somewhat pale, but normally developed. No rib fractures are observed and the axial skeleton is otherwise unremarkable.

#### HEAD AND CENTRAL NERVOUS SYSTEM:

The scalp is reflected and the calvarium removed intact. There is no epidural hemorrhage. The 1510 gram brain is symmetric. Trauma has been described. The brain and spinal cord are fixed in formalin for later sectioning.

Sections through the upper cervical cord demonstrate some focal areas of hyperemia, but no definite softening or necrosis.

The brain exhibits subarachnoid hemorrhage, somewhat more prominent on the left than on the right. The cerebellar tonsils are notched, but not grossly necrotic. The basis pontis is somewhat flattened. The left uncus is more prominent than the right. The gyri are diffusely widened and flattened.

Multiple sections reveal laceration through the corpus callosum which may be an artifact of evisceration. However, there is diffuse blurring of the gray-white interface, and numerous streak hemorrhages are in the cortical white matter of both frontal lobes, parietal lobes, occipital lobes, and in the cerebellar white matter. Streak hemorrhages are also observed in the deep gray matter. There is accentuation of the streak hemorrhages in the cortex of the left lateral parietal lobe, left superior and medial frontal lobe, and inferior frontal lobe. These almost become confluent and have to be considered contusions. The brain stem is flattened, but no discrete hemorrhage is observed.

#### SAMPLES OBTAINED:

Samples of vitreous fluid and gastric contents are retained.

#### MICROSCOPIC EXAMINATION:

#### THYMUS:

Acute involutional change, early.

PANCREAS:

No significant changes.

PITUITARY GLAND:

Acute hemorrhage in surrounding tissue. The gland itself is unremarkable.

LUNGS:

Acute pneumonia.

TESTICLE:

No significant changes.

**HEART:** 

Focally, hemorrhage is observed around superficial blood vessels. No significant myocardial changes are noted.

THYROID GLAND:

No significant changes.

BRAIN:

Marked edema, with focal subarachnoid hemorrhage.

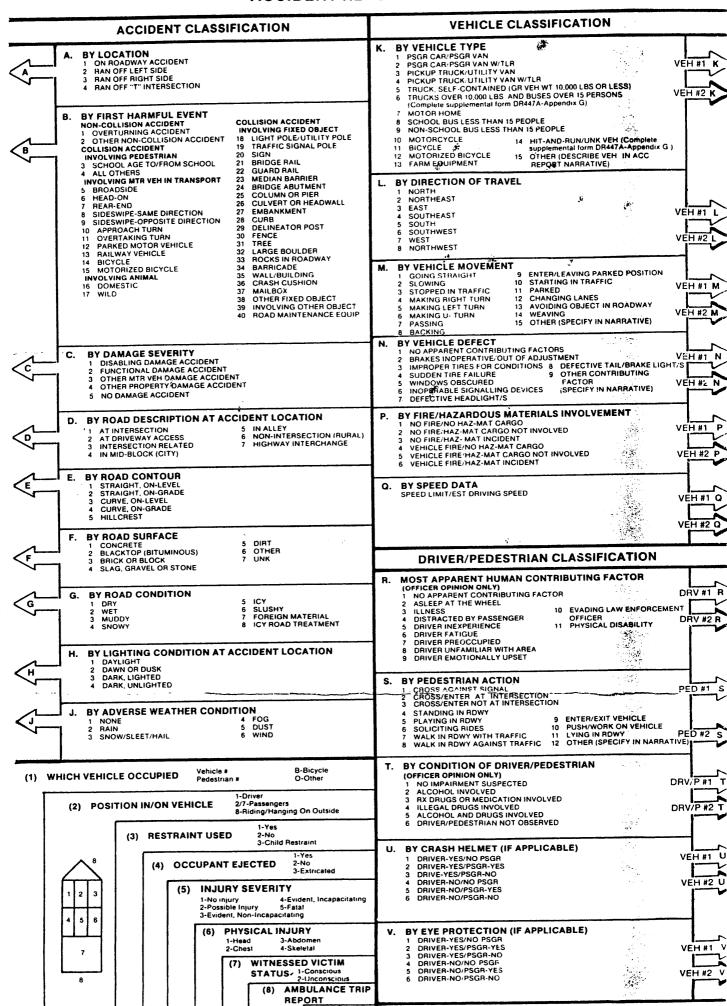
SPINAL CORD:

Acute hemorrhage is observed along the spinal cord, and along vessels of the upper cervical cord.

**DSI-95-AB-17** 

**Police Report** 

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BEST AVAILABLE

## MEMORANDUM

DATE:

TO:

FROM:

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SUBJECT:

Fatal accident

On Saturday morning,

I was working a to shift. I was working in the area when communication officer advised me at of a serious injury accident 10 miles east of She also advised troopers and in the same transmission of the accident. I asked again of the location and she said the accident was 10 miles east of

I proceeded to the location of the accident using my emergency equipment. I could hear on my radio that an ambulance had been dispatched and I overheard on my radio that a police car was near the and travelling towards and would be on the scene shortly. As I was entering I heard the say that he was on scene. I arrived on scene at

While pulling up on the scene I observed numerous vehicles parked on both sides of the highway. I observed a blue Plymouth minivan in the eastbound lane facing southeast with its front end on the fog stripe, a man sitting in the drivers seat, a bunch of people sitting and lying on the highway on a blanket near the right sliding door of the van and a lot of people standing around the vehicle. As I proceeded past the van I noticed that this van had extensive damage to the front and top of the vehicle. At this time I observed another vehicle in the south borrow ditch facing northeast approximately 20 ft. off the road. This vehicle also showed extensive damage to the front and left side of the vehicle as well as to the top of the vehicle. This vehicle was a dark gray Buick 4 dr. type vehicle. I drove past the accident scene so that I could turn around after clearing all the vehicles that were parked along sided of the road. At this time was arriving on the scene at the same time and I had to wait for him to pass so that I could turn my car around.

I turned my patrol car around and drove up near the accident and parked my vehicle directly behind from the As I exited my vehicle and started walking towards the van I noticed two tires skids leading from the eastbound lane toward the right shoulder and ending in the right shoulder. The right tire mark ended near the middle of the shoulder and the left tire skid which didn't appear to be as long and running parallel with the right skid ended in front of the van and near the top of the fog stripe on the highway.



I was met by who told me that there were some serious injuries ... to the victims of the van. He also told me that the driver was pinned in the vehicle. I also heard on the radio that the fire dept. from was enroute to assist with extrication. As I approached the van I seen kneelin near a six year old child. He looked up at me and told me that he had twice stopped breathing but that he had been able to revive him using CPR. I checked his breathing at he was breathing on his own. I then stopped to check on an infant who the mother, was holding. The baby was breathing on his own that an ambulance was enroute and would be arriving and I told very shortly. I checked the injuries of two other children and found that their injuries were not as life threatening. I went to the drivers side of the van and the driver told me that his wrists were broken and that he was pinned in the vehicle and unable to get out. I assured him that help was on the way and told him not to move. As I walked around the fron of the van I noticed another man standing with blood on his shirt and around his mouth. I asked If he had been in the accident and he said yes. I asked him if the other vehicle was his and he said yes. I asked if he had been drinking and he said no. I did not smell any alcohol on him. About this time trooper arrived on the scene. He arrived three minutes after I did. A lot of people were stopping and the area was getting congested so I ordered everyone who was not a witness or assisting with the car of the injured to leave so that we could get the ambulance to the scene.

police officer arrived on the scene and I asked him if he could assist me with traffic on the west side of the accident.

a captain with the . told me that he would assign one of his men to assist with traffic on the east side of the accident. He assigned to handle the traffic. I advised dispatch also that we needed another ambulane. I called about 4 times during a 10 minute time frame and she said that the secondary ambulance was not responding to her calls. a fireman from had stopped to assist at the accident.

The primary ambulance arrived on the scene and I directed it to the injured partithat were lying on the blanket. I talked to and she told me who everyone in the vehicle were and where they were seated. The primary ambulance transported the most serously injured of the children and in the front seat. They were taken to the Immediately upon their arrival there arrangement were made to fly both boys to to Childrens Hospital because of skull fractures

During this time trooper arrived on the scene. Both and asked me what they could do to assist with my investigation. Because everyone else was being attended to I asked if he could start assisting me by marking the vehicle that was blocking the eastbound lane and asked if he could assist me with the diagram on the notebook. I asked to get a camera and told him that I needed pictures of the accident scene and of the vehicles. I told him that I needed a lot of pictures and not to try to restrict all the pictures to one roll of film.

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By this time it was becoming apparent to me that I might not be getting and I still had at least three people that another ambulance from were going to be needing to be transported. I ran to retured to his him if he could call for an ambulance out of and came back and told me that we vehicle and called on his radio to told me that she should have an ambulance in about 10 minutes. needed to get to the hospital to be with her critical injured children and asked me if I would take her. I told her that I couldn't but that I would make to take here. She also had some leg injuries. arrangements with officer Lasked officer , and he transported from the scene to the emergency room.

I had no idea where this investigation would lead but I was realizing that there was a lot more going on at the scene then I had resources to handle and that I might need some more help. I asked to page out an investigator from the district attorneys office to come to the scene and to assist me. I was notified by that was on his way out. I asked to see if she notify because this might be an accident that we would need to reconstruct. Within ten minutes was on scene and shortly afterward was on the scene also.

arrived. Near eight o'clock the ambulance from were in this ambulance. At the same time from and the arrived driving the secondary ambulance from "'. By this time had been extricated from the vehicle that he was driving. The decision was made for to transport a fireman on the scene and also an ambulance attendant would ride in the back of the ambulance and provide care to transported the two remaining children, and and to the hospital. With all the injured removed from the scene I was able to continue with the accident investigation.

I checked with the hospital and found that they had done a medical blood screen at the lab in the hospital on and his blood alchol was a 41. Not knowing what scale the hospital used and going over the accident scene with \_\_\_\_\_ I asked him if he could go to the emergency room and obtain a blood alcohol test from \_\_\_\_\_ I'm not sure what time this was but I knew it was after 8:00am because I could here a new comminucation officer working and shift change was a 8:00 am.

I got with trooper and we determined where the point of impact was. We determined that the point of impact was 16.3' south of the center line and that impact had taken place in the eastbound shoulder. My investigation showed that the vehicle was eastbound in the eastbound lane and that the veh had skidded 97.7' prior to impact. After impact the vehicle was spun back 5.5' coming to stop facing southeast in the eastbound lane. The vehicle was westbound on rossed into the eastbound lane then the shoulder and struck the vehicle headon. There was no skid prior to impact on the vehicle and the vehicle travelled 43.8' coming to stop in the south borrow ditch. Both vehicles came to stop on their wheels.

At am I talked with

He told me tht he had witnessed the accident. He stated that he was travelling eastbound on at approximately the dairy which is 7 miles east of when he observed the eastbound ven pass him. He stated that he was travelling about 60 mph. He stated that the van continued eastbound and he thought it was speeding. He said it caught up to the car that was in front of him about a half mile. He said it appeared to him that the van had pulled out to pass the next car when it struck the westbound vehicle head-on. I obtained a written statement from him and in this statement he changed his story saying that the car had come over into the eastbound shoulder and struck the van. I believe that after he stood at the scene and looked at the skid he perceived the accident different then he had seen.

arrived on the scene shortly after am I explained to what had occured. assisted him with the measurements for the level 3 investigation. to go to the hospital and assist with the blood tests. After obtaining the measuremen: I had dispatch send me two wreckers. responded and towed the This was a 94 Plymouth Grand Voyger lic.# It was registered to The other vehicle was towed from the scene was taken to This was a . After completing my investigation at the scene I then went to the emergency room .

Upon arriving at the emergency room I was met by trooper He told me that he had the blood alcohol kits with him and I asked him to put them in the mail. He told me that the nurse that was taking care of had told her that he was driving alone in his car and that the other car was passing and had ran into him. He also stated that he had drank 2 beers about after he had gotten off work. The nurses name was

I asked a , if he would assist me in advising of his rights and assist me in questioning him. He was advised of his rights at He stated that he did not wish to talk to me until after he had talked to an attorney.

I talked to while he was lying in the emergency room and just prior to him being airlifted to and he told me that he was travelling east on He said that he seen the vehicle in front of him swerve to the shoulder and next thing he seen was this other vehicle coming towards him. He said he had no time to get out of his way and they met headon. I asked him how fast he was going and he said 60 mph. I asked him if he was passing another vehicle and he said no. While he was being readied to be taken to the roof to be put on the helicopter another helicopter arrived to transport his daughter

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Folt

After leaving the hospital I felft that I had enought information to go to the office and start working on the accident report. I contacted and her performed a mechanical inspection on both vehicles.

was able to take some photographs of the accident scene from the air. At this time I don't have these reports or photographs of the accident however they will be included in the fatal file as soon as we get a copy of the reports and photos.

I was able to talk to and got a statement from She stated that "My husband got takes an hour to get home got home around. off work around When he got home he ate dinner took shower, and showed me the map to where he was going which was to and then to He had one beer to drink with dinner he left I would say around Then he called me around time collect from He told me he had stop to rest awhile and to wash his face with cold water because he was very tired. Did not hear from him no more until the next morning for the that he was in a car wreck". I talked to again about and she told me on the telephone that on Her husband had gone to bed at and slept till He then got up and worked on the car until at which time he had gone to work. He works for and it takes one hour to get to work. I had already told her what had happened at the accident and she said tht her husband had told her that he couln't remember anything prior to being involved in the accident. He could only remember that right after the crash the car spun around and he found himself travelling in the borrow ditch. I advised her that at this point it appeared that the charges against her husband were vehicular homicide, vehicular assault (3 counts), drove a vehicle without valid drivers license, and operated an uninsured motor vehicle on a public roadway. I told her that her husband would be taken to the and would have to post a bond prior to he being allowed to go home.

contacted me and told me that he had obtained a statement from a distant relative of his who had witnessed the accident. The witness was

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She said

I was driving our red Chevrolet Cavalier to to shop with my two daughters. At around we were headed east on highway approximately 10 miles outside of going about I noticed the car coming west in the other lane start to cross over into my lane. I watched him and  $h\boldsymbol{\varepsilon}$ continued to come toward me. I swerved off the road to the right shoulder into the dirt abd ge barely missed my car. I looked in my rear view mirror as he hit the minival directly behind me. The oncoming car then went into the ditch. I stopped and backed up and ranto see if I could help the people in the minivan. I went to the driver and told him to unlock his door so I could help. He looked dazed like he was in shock. He said "I can't, both my arms are broken". Then I went to the other side of the van. The lady was leaning over the baby in the car seat frp, behind saying,"I can't get my baby out of the car seat!" The baby looked unconcious. There was a child in the front seat not making any sounds and

and and

BEST AVAILABLE

there was a child in the back screaming hysterically. The driver did have his seat belt on. The baby was in the car seat. Idid not notice whether the others were in seat belts". She did go on to say "When the accident occured the minivan was following behind me pretty close. I had just remarked about that to my daughters I don't like to be followed close. He did not seem interested in passing me He had followed for quite awhile and just seemed to let me set the pace".

At this point I am waiting for trooper accident investigaion on this accident.

to do a level 4

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## WITNESS LIST

Pg \_\_ of \_\_Pgs

NAME			_ STATEMEN	T ()yes ()no
ADDRESS		PHONE:	work	ome
	Investigated the acciden			
and fi	led paperwork with the dist	rict attorneys of	ffice.	
NAME			STATEMENT	()yes ()no
ADDRESS		PHONE:		home
CAN TESTIFY TO: _	Assisted Technician	on scene with	accident.	Took pictures of
accident scene a	and then responed to		to	assist with
blood alchol tes	st administered to the drive	er	Assi	sted on scene
with paperwork,	inventory of vehicles, and	measurements.		
				-
NAME			_ STATEMEN	r ()yes ()no
ADDRESS		PHONE:	work	home
CAN TESTIFY TO: _	Assisted Technician	on scene with	accident.	Took measurements
on scene and ass	isted with paperwork at sce	ne of accident.	Also assi	sted with the
inventory of veh	icles, and assisted	with mea	surements	for level 3
accident investi	gation.			
NAME			STATEMENT	r () yes () no
ADDRESS		PHONE:	work	home
CAN TESTIFY TO: _	Assisted on scene with in	vestigation. To	ok measure	ments and
did damage analy	sis of vehicles. Assisted	with interviewin	g witness	to accident.
			***************************************	

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT.(KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	84.4	-84.1	7.4	-5.0
	VEH #2	90.5	-89.1	-15.7	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2:360010.6 JOULES

SUMMARY OF DAMAGE DA	TA	(* INDICATES DEFAULT VALUE)
VEHICLE	# 1	VEHICLE # 2
TYPECATEGORY	5	TYPECATEGORY 4
STIFFNESSCATEGORY	7	STIFFNESSCATEGORY 4
WEIGHT 1841.	2 KGS	WEIGHT 1717.3 KGS
CDC12FZEW7		CDC12FDEW6
L 158.0	CM.	L 177.8 CM.
C1 22.9	CM.	C1 55.9 CM.
C2 45.7	CM.	C2 48.3 CM.
C3 86.4	CM.	C3 76.2 CM.
C4 106.7	CM.	C4 101.6 CM.
C5 132.1	CM.	C5 144.8 CM.
C6 137.2	CM.	C6 170.2 CM.
D 20.6	CM.	D 21.6 CM.
RHO 1.00	*	RHO 1.00 *
ANG5.0	DEG.	ANG 10.0 DEG.
D' 39.0	CM.	D' 42.3 CM.
		TURDUTAL DRADERUTES

#### DIMENSIONS AND INERTIAL PROPERTIES

A1	=	142.5	CM.	A2	=	138.9	CM.
B1	=	160.0	CM.	B2	=	150.4	CM.
TR1	=	161.8	CM.	TR2	=	157.0	CM.
I1	=	481714	.4 NEWT-SEC**2-CM	12	=	416061	.5 NEWT-SEC**2-CM
M1	=	18.482	NEWT-SEC**2/CM	M2	=	17.239	NEWT-SEC**2/CM
XF1	=	258.6	CM.	XF2	=	251.0	CM.
XR1	=	-309.6	CM.	XR2	=	-289.6	CM.
YS1	=	101.3	CM.	YS2	=	97.8	CM.

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT.(MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	52.5	-52.3	4.6	-5.0
, , , , , , , , , , , , , , , , , , , ,	VEH #2	56.2	-55.4	-9.8	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2:265494.6 FT-LB.

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
                                        VEHICLE # 2
          VEHICLE # 1
                                     TYPE-----CATEGORY 4
TYPE----CATEGORY 5
STIFFNESS---CATEGORY 7
                                     STIFFNESS---CATEGORY 4
                                     WEIGHT---- 3786.0 LBS.
WEIGHT----- 4059.0 LBS.
CDC-----12FZEW7
                                     CDC-----12FDEW6
L----- 62.2 IN.
                                     L-----
                                                   70.0 IN.
C1-----
                                     C1-----
                                                   22.0 IN.
             9.0 IN.
C2----- 18.0 IN.
C3----- 34.0 IN.
                                     C2-----
                                                   19.0 IN.
                                     C2----- 19.0 IN.
C3----- 30.0 IN.
             34.0 IN.
C4----- 42.0 IN.
                                     C4-----
                                                   40.0 IN.
C5----
                                     C5-----
                                                   57.0 IN.
             52.0 IN.
C6----
                                     C6----
                                                   67.0 IN.
             54.0 IN.
                                     D-----
             8.1 IN.
                                                   8.5 IN.
RHO-----
                                     RHO-----
                                                   1.00
             1.00
                                                  10.0 DEG.
ANG-----
             -5.0 DEG.
                                     ANG-----
D'----
                                     D'----
                                                   16.6 IN.
             15.4 IN.
                   DIMENSIONS AND INERTIAL PROPERTIES
                                             54.7
                                                    IN.
A1
         56.1
                IN.
                                    A2
               IN.
                                    B2
                                            59.2
                                                    IN.
    = 63.0
B1
       63.7
                                    TR2
                                            61.8
                                                    IN.
TR1
    =
               TN.
                                             36826.4 LB-SEC**2-IN
         42637.4 LB-SEC**2-IN
I1
    =
                                    12
                                        =
                                                    LB-SEC**2/IN
    = 10.554
                                         = 9.844
               LB-SEC**2/IN
                                    M2
M1
                                        =
   = 101.8
= -121.9
                                    XF2
                                            98.8
                                                    IN.
XF1
                IN.
                                    XR2 = -114.0
                                                    IN.
XR1
                IN.
                                    YS2 =
                                                    IN.
                                             38.5
YS1
        39.9
                IN.
```

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	60.3	-60.1	5.3	-5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2: .0 FT-LB.

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
          VEHICLE # 1
                                          VEHICLE # 2
TYPE-----CATEGORY 5
STIFFNESS---CATEGORY 7
                                       TYPE-----CATEGORY 11
                                       STIFFNESS---CATEGORY 0
                                       WEIGHT-----1000000.0 LBS.
CDC------BARRIER
L------ 0 IN.
WEIGHT----- 4059.0 LBS.
CDC-----12FZEW7
L----- 62.2 IN.
                                       C1----
C1-----
                                                       .0 IN.
              9.0 IN.
                                       C2----
C2-----
              18.0 IN.
                                                       .0 IN.
                                       С3-----
C3---- 34.0 IN.
                                                       .0 IN.
            42.0 IN.
52.0 IN.
C4-----
                                       C4-----
                                                        .0 IN.
                                                       .0 IN.
                                       C5----
C5-----
C6----
                                       C6-----
             54.0 IN.
                                                       .0 IN.
                                       D-----
D-----
               8.1 IN.
                                                        .0 IN.
                                       RHO-----
RHO----
              1.00
                                                     1.00
                                                      .0 DEG.
ANG-----
              -5.0 DEG.
                                       ANG-----
             15.4 IN.
D'----
                                       D'----
                                                       .0 IN.
                    DIMENSIONS AND INERTIAL PROPERTIES
         56.1
A1
                 IN.
                                     A2
                                               50.0
     =
                                                       IN.
B1
          63.0
                 IN.
                                     B2
                                               50.0
                                                       IN.
                                              50.0
TR1
        63.7
                IN.
                                     TR2 =
                                                       IN.
          42637.4 LB-SEC**2-IN
                                          =2600104000.0 LB-SEC**2-IN
I1
                                     12
     = 10.554
M1
                LB-SEC**2/IN
                                     M2
                                          =2600.104
                                                      LB-SEC**2/IN
    = 101.8
XF1
                 IN.
                                     XF2
                                          = 50.0
                                                       IN.
XR1
     = -121.9
                 IN.
                                     XR2
                                               -50.0
                                                       IN.
YS1
        39.9
                 IN.
                                     YS2
                                              50.0
                                                       IN.
```

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	97.0	-96.7	8.5	-5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2: .0 JOULES

SUMMARY OF DAMAGE DATA VEHICLE # 1	(* INDICATES DEFAULT VALUE) VEHICLE # 2	
VB1 0222 " 1	V2.11.2.02.0	
TYPECATEGORY 5	TYPECATEGORY 11	
STIFFNESSCATEGORY 7	STIFFNESSCATEGORY 0	
WEIGHT 1841.2 KGS	WEIGHT 453600.0 KGS	*
CDC12FZEW7	CDCBARRIER	
L 158.0 CM.	L0 CM.	*
C1 22.9 CM.	C10 CM.	*
C2 45.7 CM.	C20 CM.	*
C3 86.4 CM.	C30 CM.	*
C4 106.7 CM.	C40 CM.	*
C5 132.1 CM.	C50 CM.	k
C6 137.2 CM.	C60 CM.	k
D 20.6 CM.	D0 CM.	k
RHO 1.00	* RHO 1.00	*
ANG5.0 DEG.	ANG0 DEG.	*
D' 39.0 CM.	D'0 CM.	
DIME	INSIONS AND INERTIAL PROPERTIES	

A1	=	142.5	CM.	<b>A</b> 2	=	127.0	CM.
B1	=	160.0	CM.	B2	=	127.0	CM.
TR1	=	161.8	CM.	TR2	=	127.0	CM.
11	=	481714	.4 NEWT-SEC**2-CM	12	=*	*****	** NEWT-SEC**2-CM
M1	=	18.482	NEWT-SEC**2/CM	M2	=4	553.302	NEWT-SEC**2/CM
XF1	=	258.6	CM.	XF2	=	127.0	CM.
XR1	=	-309.6	CM.	XR2	=	-127.0	CM.
YS1	=	101.3	CM.	YS2	=	127.0	CM.

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE			TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH	#1	73.3	-72.2	-12.7	10.0
	VEH	#2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:360010.6 JOULES VEH#2: .0 JOULES

SUMMARY OF DAMAGE DATA		(* INDICATES DEFAULT VALUE)	1	
VEHICLE #	1	VEHICLE # 2		
TYPECATEGORY STIFFNESSCATEGORY		TYPECATEGORY		
WEIGHT 1717.3	-	WEIGHT 453600.	-	*
CDC12FDEW6		CDCBARRIER	•	
L 177.8 (	CM.	L(	CM.	*
C1 55.9 (	CM.			*
C2 48.3 (	CM.	C2(	CM.	*
C3 76.2 C	CM.	C3(	) CM.	*
C4 101.6 C	CM.	C4(	CM.	*
C5 144.8 C	CM.	C5(	CM.	*
C6 170.2 C	CM.	C6(	CM.	*
D 21.6 (	CM.	D	CM.	*
RHO 1.00	*	RHO 1.00	)	*
ANG 10.0 I	DEG.	ANG(	DEG.	*
D' 42.3 (	CM.	D'(	CM.	
	DIMENSIONS AND	INERTIAL PROPERTIES		

A1	=	138.9	CM.	A2	=	127.0	CM.
B1	=	150.4	CM.	B2	=	127.0	CM.
TR1	=	157.0	CM.	TR2	=	127.0	CM.
I1	=	416061	.5 NEWT-SEC**2-CM	12	=**	******	* NEWT-SEC**2-CM
M1	=	17.239	NEWT-SEC**2/CM	M2	=45	553.302	NEWT-SEC**2/CM
XF1	=	251.0	CM.	XF2	=	127.0	CM.
XR1	=	-289.6	CM.	XR2	=	-127.0	CM.
YS1	=	97 8	CM	YS2	=	127 0	CM

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE			TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1 45.		45.6	-44.9	-7.9	10.0
	VEH	#2	.0	.0	.0	: .0

ENERGY DISSIPATED BY DAMAGE VEH#1:265494.6 FT-LB. VEH#2: .0 FT-LB.

SUMMARY OF DAMAGE DATA (\* INDICATES DEFAULT VALUE)
VEHICLE # 1

VEHICLE # 2

TYPECATEGORY	4	TYPECATEGORY	11
STIFFNESSCATEGORY	4	STIFFNESSCATEGORY	0
WEIGHT 3786.	0 LBS.	WEIGHT1000000.	O LBS.
CDC12FDEW6		CDCBARRIER	
L 70.0	IN.	L	IN. *
C1 22.0	IN.	C10	IN. *
C2 19.0	IN.	C20	IN. *
C3 30.0	IN.	C30	IN. *
C4 40.0	IN.	C40	IN. *
C5 57.0	IN.	C50	IN. *
C6 67.0	IN.	C60	IN. *
D 8.5	IN.	D0	IN. *
RHO 1.00	*	RHO 1.00	*
ANG 10.0	DEG.	ANG0	DEG. *
D' 16.6	IN.	D'0	IN.

#### DIMENSIONS AND INERTIAL PROPERTIES

A1	=	54.7	IN.	A2	=	50.0	IN.
В1	=	59.2	IN.	B2	=	50.0	IN.
TR1	=	61.8	IN.	TR2	=	50.0	IN.
I1	=	36826	.4 LB-SEC**2-IN	12	=26	00104000	.0 LB-SEC**2-IN
M1	=	9.844	LB-SEC**2/IN	M2	=26	00.104	LB-SEC**2/IN
XF1	=	98.8	IN.	XF2	=	50.0	IN.
XR1	=	-114.0	IN.	XR2	=	-50.0	IN.
YS1	=	38.5	IN.	YS2	=	50.0	TN.

# WITNESS LIST

Pg 3 of Pgs

NAME	STATEMENT (k) yes () no
ADDRESS	PHONE: work home
CAN TESTIFY TO:	Witness to accident. She was travelling eastbound on
when whe observed	a westbound vehicle travel into the eastbound lane. She pulled off
to the right shou	lder to avoid being hit. She immediately stopped after the accident
occured behind he	r and rendered assistance until emergency help arrived.
NAME	STATEMENT () yes () no
ADDRES (	PHONE: work home
CAN TESTIFY TO:	Performed the analysis of the blood sample from
at the	
	\*
NAME	STATEMENT () yes () no
ADDRESS	PHONE: work home
CAN TESTIFY TO:	On first ambulance on scene. Performed emergency medical treatment
on the most serous	sly injured at the scene and transported to regional
NAME	STATEMENT ()yes ()no
ADDRESS:	PHONE: wor nome
CAN TESTIFY TO:	On first ambulance on scene. Performed emergency medical treatment
on the most serous	ly injured at the scene and transported to

Page \_\_\_\_\_

Case #	<u>WITNESS LIST</u>	Pg 4 c	MILABLE  ofPgs
NAME		STATEMENT (	)yes ()no
ADDRESS		PHONE: work	_ home
CAN TESTIFY TO:	Responed to the scene as a fireman	. I asked him to go	to the
hospital and as	sist me with interrogating the driver	3	
`-	him of his rights in spanish. After	being advised of hi	s rights
the driver state	ed that he did not wish to talk to an	yone until after he	had talked
to an attorney.	He assisted with getting the correc	t name and dob of th	ne driver.
NAME		STATEMENT (K	)yes ()no
ADDRESS		PHONE: work	
CAN TESTIFY TO:	She was an who was called to t	he emergency room to	assist
the accident vio	ctims. She treated the driver,	Smelled	odor of
alcohol on drive	er. Driver told her that he was drive	ing and that he had	two beers to
drink at	when he got off work.		
NAME		STATEMENT (	)yes ()no
ADDRESS /		PHONE:	
CAN TESTIFY TO: _	Can testify that he was driving eas	stbound on	following
another vehicle	when he seen the vehicle in front of	him sereve and then	he seen
a vehicle coming	towards him in his lane of traffic.	He slammed on his	brakes but wa
unable to avoid	a head on collision.		
NAME		STATEMENT (	)yes ()no
ADDRESS		PHONE: work	nome

CAN TESTIFY TO: \_\_\_ That she was riding in the back seat of a van that her husband was

driving when she heard her husband scream and she seen a vehicle coming towards her

in the lane they were driving. She can testify as to where everyone that was riding

in her vehicle were seated.

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Page	

Case #

# WITNESS LIST

 $Pg = \frac{5}{2} of Pgs$ 

NAME				STATEMEN	r () yes () no
ADDRESS	****		PHONE:	work	home
CAN TESTIFY TO:	That he was work	ing in the emergen	cy room	of the	
Regional Medica	al Center the day of	the accident and	he atte	nded to	
NAME _				STATEMENT	tyes ()no
ADDRESS \	/NC		PHONE:	worl	nome
CAN TESTIFY TO:	Was working in t	he emergency room	of the	×1	Regional
Medical Center	the day of the acci	dent and treated	a a	nd	
					,
				STATEMENT	()yes ()no
ADDRESS			PHONE:	work	ome
CAN TESTIFY TO:	Was working in t	he emergency room	of the		Regional
Medical Center	the day of the acci	dent and treated	an	d	
NAME				STATEMENT	()yes ()no
ADDRESS			PHONE:	wor.	home
CAN TESTIFY TO:	Was working in th	he emergency room	of the		Regional
Medical Center	the day of the accid	dent and treated v	ictims	of the acci	dent.
	·				
	·				
					·

Page \_\_\_\_

Case #

# WITNESS LIST

Pg 6 of Pgs

NAME	STATEMENT ()yes ()no
	PHONE: work pme
CAN TESTIFY TO: Took pictures of vehicle	at storage lot.
NAME	•
ADDRESS'	
CAN TESTIFY TO:	
NAME	<u>.</u>
ADDRESS"	PHONE: work home
CAN TESTIFY TO:	
NAME	
ADDRESS *	
CAN TESTIFY TO:	

51

# MEASUREMENTS FOR SCALE DIAGRAM

Case No.		
Officers:		-
Date of Accident	Location	
Date of Measurements	Type of Measurements	
Reference Point(s)	r_of	x Coordinate

	POINT	POINT	(N-S)	(E-W)
1 .	Veh #2 Rt Side End Skid		5.2'N	409.9'E
2.	Veh #2 Rt. side start skie		10.4'N	322.3'E
3.	Veh #2 Lft side end skid		10,5'N	410'E
4.	Veh #2 Lft side start ski		15.5'N	325.5'E
5.	Veh #2 Lft rear wheel @ re	est	15.8'N	404.8'E
6.	Veh #2 Rt rear wheel @ re:	st .	13.1'N	400.6'E
	Veh #1 gouges near POC/max	eng	6.6'N	413'E
8.	Veh # 1 start sked (under	carriage)	2.8'S	409.5'E
9.	Veh #1 end skid (under ca	riage)	28'S	376.4'E
10.	Veh #1 Rt front wheel @ r	est	21.6'S	377.7'E
11	Veh #1 Lft front wheel @	rest	22.1'S	371.7'E
12	Veh #1 total sked after c	ntact	42' -	
13.	Veh #2 Rt side all wheel	skid	86.5'	
14 -	Veh #2 Lft side all wheel	skid	84.6'	
-	Est POC		6.6'N	412'E
-				
-				
-				

# MEASUREMENTS FOR SCALE DIAGRAM

Case No.	
Officers:	
Date of Accident	Location
Date of Measurements Same	Type of Measurements Triangulat
Reference Point(s) South east Con	W Coond:

			,	
	POINT	POINT	(N-S)	(E-W)
1	Ueh#2 Rt Side END	SKID	S.2' H	409.9'E
2	Vanto Rt Side Signi	SITA	10.41 N	322.3 E
3	Uch#2 LFT Side F. MD	SKTD	10.5'N	410'E
U	Udi#2 114 Side Silvert	SKID	155 N	325.5 E
5		What WREST	15.8 ' M	404.8'E
6	Ud. #2 Rt Reir	Whele Rest	13.1 11	400.6'E
7.	UPHTI GOLYS MOOR	PCC/MAY ENG.	6.6'N	413' E
8.	Uch I Start Skill	(under carriage)	2.8'5	4095 F
9_	Uel TI FILD SICTO	(UNDER CLARINGE)	28' S	376,4'E
10_	Uch#   RT FRONT	WHEEL @ REST	21.6'5	37).7F
11 _	Uch I LFT FRONT	WHEF @ REST	22.1'.5	371.7'E
12_	Leht TOTAL SIOTE	AFTER CONTACT	. 42'	
13_	Ush#2 RT Sit all	wheel Skick	86.51	***************************************
14_	Veh#2 LFT Side sll	wheel Skiel	81.6'	
	F.ST Pac		6.6' N	412 E
-				
==				· · · · · · · · · · · · · · · · · · ·

# ANAMANANANA A

	INCOMPLETE
<u> </u>	LED (DATE) UNDER \$1000
SALVAGE? #1 #2 SUPP REPT FI	LED (DATE) UNDER 31000
ROAD CODE MILEPOST	
DATE OF ACCIDENT TIME	DAY OF WEEK
COUNT	ry
DATE NOTIFIED OF ACCIDENT TIME	INV. AT SCENE
DATE ARRIVED ON CENE TIME	
DATE ARRIVED ON SEENE THE	
DATE OF REPORT # KILLED	# INJURED
0	/
ROUTE, STREET, ROAD	ILESNS
FE	EET E W
A	T INTERSECTION WITH
OF ROUTE, STREET, ROAD, MILEP	OST
OTHER LOCATION	
PUB. PROP.   TOTAL James	DISTRICT # PHOTOS TAKEN
RAIL. CROSS. CONST. ZONE	WILD GAME PRIVATE PROPER
ASSISTED BY:	
ASSISTED BY:	
BLOTTER FICED (DATE	/ TIME)

-							
VEH. #1 O	R PARKED	) UNA	TTENDE	) PE	EDESTRI.	AN #	
LAST NAM	<b>E</b> ¶			FIR	ST_		
STREET AL	DRESS		ı		IES.	рноме	_
CITY							
DRIVER LIC	. NO.			3EX	DATE	OF BIRT	Н
1/19	V6			. M			
D.L. CLASS	SUSPENDED	DENIED	DATE		AGE	WGTH	G.
	REVOKED	EXPIRED	Ì		25	15-61	16
VIOLATION	(S)		L		HAII	EYE PA	S
VICLATION	ON CODE(S)	CITAT	ON NUM	BER(S)	COMM	ON CODE	=(\$
YEAR MA	KE		MOD	FI	1		
YEAR MA					ARA		
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							M
LIC PLATE	#   SIAI	E BOL	Y TYPE			BOTTO	M)
		-1	1/DR		RY	7 80110	M)
	#   SIAI	-1	1/DR				M)
VEH IDENT	IFICATION N	UMBER	17DR				
VEH IDENT		UMBER	YDA			M.	
VEH IDENT	IFICATION N	UMBER	IVR.	G	RY_	М.	
VEH IDENT	IFICATION N	UMBER	CIT	G			
VEH IDENT	IFICATION N	UMBER	IVR.	G	RY_	М.	
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VEH OWNE  SADDRESS  INS COMPA	IFICATION N	UMBER	CIT	G	STATE	M. ZIP	
VEH IDENT VEH OWNE  ADDRESS INS COMPA	IFICATION N R LAST NÁMI	UMBER	CIT	G	STATE	M. ZIP	
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VEH OWNE  SADDRESS  INS COMPA	IFICATION N R LAST NÁMI	UMBER	CIT	G	STATE	M. ZIP	
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VEH OWNE  ADDRESS  INS COMPA  POLICY #	IFICATION N R LAST NÁMI  MY  NY  NWE	UMBER	37 4 5 15 15 15 15 15 15 15 15 15 15 15 15 1	3 : 5 2 18	STATE 246 7	M. ZIP 8 9 10 11	
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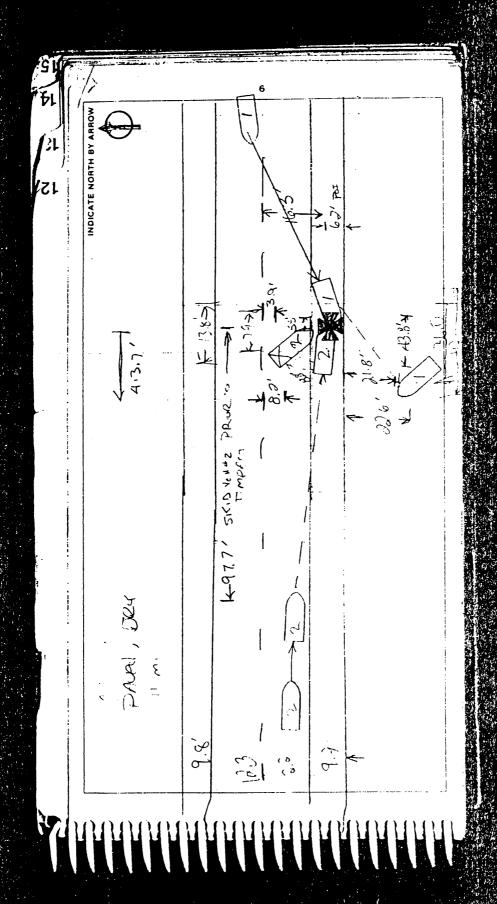
. V	UNATTENDED PEDESTRIAN #
LAST NAMF	FIRST M I
STREE : AUUNESS	A RES. PHONE
CITX	STATE ZIP CODE BUS. PHONE
DRIVER LIC. NO.	STAME SEX
D.L. GEASS SUSPENDED DE	PIRED Q C 13/00 C
VIOLATION(S)	Bra BRD
VIOLATION CODE(S)	CITATION NUMBER(S) COMMON CODE(S)
YEAR MAKE PLY	BODY TYPE COLOR (TOP / BOTTOM)
LIC PLATE # STATE	VAN BLU
VEH IDENTIFICATION NIII	MRFR
VEH OWNER LAST NAME	M.I.
VEII OFFICE IN LAND	
ADDRESS	CITY STATE ZIP
ADDRESS	CITY STATE ZIP
ADDRESS INS COMPANY POLICY # EXP. DATE	CITY STATE ZIP  3 3;4 3;52;6;7;8  27  18  19  10
ADDRESS INS COMPANY POLICY #	CITY STATE ZIP  3 3 4 3 52 6 7 8  2 18 19 9  10 10  16 15 14 13 12 11
ADDRESS INS COMPANY  POLICY #  EXP. DATE  DAMAGE TO TRAILER	CITY STATE ZIP  3 3 4 3 52 6 7 8  2 18 19 10  16 15 14 13 12 11  20 Undercarriage
ADDRESS INS COMPANY  POLICY #  EXP. DATE  DAMAGE TO TRAILER	CITY STATE ZIP  3 3 4 3 52 6 7 8  2 18 19 9  10 10  16 15 14 13 12 11
ADDRESS INS COMPANY  POLICY #  EXP. DATE  DAMAGE TO TRAILER	CITY STATE ZIP  3 3 4 3 52 6 7 8  2 18 19 9 10 16 15 14 13 12 11 20 Undercarriage 3
ADDRESS INS COMPANY  POLICY #  EXP. DATE  DAMAGE TO TRAILER  VEH # TOWER	CITY STATE ZIP  3 3;4 3;52;6;7;8  2 18 19 9 10 16;15;14;13;12;11 20 Undercarriage
ADDRESS INS COMPANY  POLICY #  EXP. DATE  DAMAGE TO TRAILER  VEH #  TOWER  OWNER OF DAMAGED PR	CITY STATE ZIP  3 3 4 3 52 6 7 8  2 18 9 10  16 15 14 13 12 11  20 Undercarriage 3  HOPERTY  CITY STATE ZIP

#### ACCIDENT CLASSIFICATION A. BY LOCATION ON ROADWAY ACCIDENT HAN OLF LEFT SIDE HAN OFF RIGHT SIDE HAN OFF "T" INTERSECTION B. BY FIRST HARMFUL EVENT COLLISION ACCIDENT NON-COLLISION ACCIDENT INVOLVING FIXED OBJECT 18 LIGHT POLE/UTILITY POLE OVERTURNING ACCIDENT $\mathbb{C}$ OTHER NON-COLLISION 19 TRAFFIC SIGNAL POLE ACCIDENT 20 SIGN 21 BRIDGE RAIL COLLISION ACCIDENT INVOLVING PEDESTRIAN GUARD RAIL MEDIAN BARRIER 3 SCHOOL AGE TO FROM SCHOOL ALL OTHERS 24 BRIDGE ABUTMENT INVOLVING MTR VEH COLUMN OR PIER CULVERT OR HEADWALL BROADSIDE EMBANKMENT HEAD-ON 28 CURB REAR-END 29 DELINEATOR POST SIDESWIPE-SAME DIRECTION SIDESWIPE-OPPOSITE DIRECTION 30 FENCE LARGE BOULDER 10 APPROACH TURN 33 ROCKS IN ROADWAY 34 BARRICADE 11 OVERTAKING TURN 12 PARKED MOTOR VEHICLE WALL/BUILDING 12 RAILWAY VEHICLE 36 CRASH CUSHION MAIL BOX 15 MOTORIZED BICYCLE OTHER FIXED OBJECT INVOLVING ANIMAL 39 INVOLVING OTHER OBJECT 16 DOMESTIC 40 ROAD MAINTENANCE EQUIP 17 WILD C. BY DAMAGE SEVERITY 1 DISABLING DAMAGE ACCIDENT 2 FUNCTIONAL DAMAGE ACCIDENT 3 OTHER MTR VEH DAMAGE ACCIDENT OTHER PROPERTY DAMAGE ACCIDENT NO DAMAGE ACCIDENT D. BY ROAD DESCRIPTION AT ACCIDENT LOCATION AT INTERSECTION 5 IN ALLEY (p NON-INTERSECTION (RURAL) AT DRIVEWAY ACCESS HIGHWAY INTERCHANGE INTERSECTION RELATED IN MID-BLOCK (CITY) E. BY ROAD CONTOUR CURVE, ON-GRADE STRAIGHT, ON-LEVEL STRAIGHT, ON-GRADE HILLCREST CURVE, ON-LEVEL F. BY ROAD SURFACE 1 CONCRETE 2 OTHER BLACKTOP (B:TUMINOUS) BRICK OR BLOCK SLAG, GRAVEL OR STONE G. BY ROAD CONDITION DRY SLUSHY WET FOREIGN MATERIAL MUDDY H. BY LIGHTING CONDITION AT ACCIDENT LOCATION 3 DARK, LIGHTED 4 DARK, UNLIGHTED DAWN OR DUSK BY ADVERSE WEATHER CONDITION NON DUST SNOW/SLEET/HAIL



# AHMAHAMAHAMAHAMA

	VEHICLE CLASSIFICATION	NC
	K. BY VEHICLE TYPE  1  PSGR CAR/PSGR VAN 2  PSGR CAR/PSGR VAN WITTE 3  PICKUP TRUCK/UTILITY VAN 4  PICKUP TRUCK/UTILITY VAN W/TLR 5  TRUCK SELF-CONTAINED (GR VEH WT 10,000 LBS OR LESS) 6  TRUCKS OVER 10,000 LBS AND BUSES OVER 15  PERSONS (Complete supplemental form DR557A-Appendix G) 7  MOTOR HOME 8  SCHOOL BUS LESS THAN 15 PEOPLE 10  MOTORCYCLE 11  BICYCLE 12  MOTORIZED BICYCLE 13  FARM EOUIPMENT 14  HIT-AND-RUN/UNK VEH (Complete supplemental form DR447A-Appendix G) 15  OTHER (DESCRIBE VEH IN ACC REPORT NARRATIVE)	K. #1 /
'	L. BY DIRECTION OF TRAVEL  1 NORTH 5 SOUTH 2 NORTHEAST 6 SOUTHWEST 3 EAST 7 WEST 4 SOUTHEAST 8 NORTHWEST	L. #1 7
N	M. BY VEHICLE MOVEMENT  GOING STRAIGHT SLOWING STOPPED IN TRAFFIC MAKING RIGHT TURN MAKING LEFT TURN MAKING U-TURN MAKING MAKING U-TURN MAKING	#1 /
	1. BY VEHICLE DEFECT 1 NO APPARENT CONTRIBUTING FACTORS 2 BRAKES INOPERATIVE/OUT OF ADJUSTMENT 3 IMPROPER TIRES FOR CONDITIONS 4 SUDDEN TIRE FAILURE 5 WINDOWS OBSCURED 6 INOPERABLE SIGNALLING DEVICES 7 DEFECTIVE HEADLIGHT/S 8 DEFECTIVE TAIL/BRAKE LIGHT/S 9 OTHER CONTRIBUTING FACTOR (SPECIFY IN NARRATIVE)	N. #1 7 #2 /
	BY FIRE/HAZARDOUS MATERIALS INVOLVEMEN  1 NO FIRE/NO HAZ-MAT CARGO  2 NO FIRE/HAZ-MAT CARGO NOT INVOLVED  3 NO FIRE/HAZ-MAT INCIDENT  4 VEHICLE FIRE/NO HAZ MAT CARGO  5 VEHICLE FIRE/HAZ-MAT SARGO NOT INVOLVED  6 VEHICLE FIRE/HAZ-MAT INCIDENT	P. #1 / #2 /
Q. 	BY SPEED DATA SPEED LIMITZEST DRIVING SPEED	0. #1 5/55 #2 55/00



# AMAMAMAMAMAMAMA

ACCIDENT DESCRIPTION
VEH to
1
WAS Wast Borns as
- Witer Vertice Closses
INTO EAST EXTURNO LANE & STRUCK WHICH WAS ELTED
VEHICLE # 2 WHICH WAS ELUTB.
IN EXTERNING SHOULDER VEHILL
KIMEN IRAVELLE UZE'
10 STOP HO ITS COMPARE IN Q.
BOLLOW DITCH. UGHICLE \$ 5.00
BACK S.S' AFTEX MIDDET Comuse
To god
10 50 on its WHEELS IN EASTRON
ANE.
***
1
11
· · · · · · · · · · · · · · · · · · ·

# **WITNESS STATEMENT**

ooper:	UCR/Case #:	
efendant:	Date of Incident:	
Location:	County:	
I make the following statement of my implied to induce me to make this state.	own free will with no force or threats used agaitement:	ainst me and no promises made c
Name: _	Phone: Home.	siness: <u>Same</u>
Home Address:		· · · · · · · · · · · · · · · · · · ·
Business Name: _		
Business Address:	,	
our Red Cheurs	ut lavalier to	I was diving
	my jauchters.	
at around 70:		ided East on
Hishward ax	provinately 10 mile	outsile of
, gring	about bb MPH. 111	noticed the
can coming is	est in the other lane	Start To Cros
over into my la	ne. I watched his	n and he
continued to co	ne toward me il si	versed of the
road onto the re	int sholder into the	e dit and he
barries missed in	my car. I looked in	me rear vier
mirration as he	but the Mini wan	lirectly behind
me The onconi	no law then went in	to the ditch.
of stopped a	nd backed up and ra	n to pro is il
could help the pe	aple in the Misse Van.	I went to the
	him To unlock his de	
help. He looked	daned like he was	in pot shock.
He said " I can	it both of me aims	are broken."
Shend went to to	re other side of the	ian. The
lady was leaving	ye over the bade in I	he can seat
From behind o	Saying "Il casht get,	my babyout
Deliver was a chi		
	ed in the front sea	at not making
∪ate:	Signature:	at not making
∪ate:	U	at not making

Any sounds and there was a child in the back
screaming hustically. The driver did have
be seat but on. The baby was in a car seat is
did not notice whether the others were in
seat bills. I am not suring they were not - I
seat bills. I am not saying they were not - I fust didn't notice.
People were stopping and coming to help. The
man in the repiele following the nine van
come up to the van about the same time ildie.
I told The lady in the mine wan that il
would go call an ambulance of diene East to
The rearest home and called for an ambulance.
I saw a highway patrol of police can going
The rearest home and called for an ambulance. I saw a highway patrol of police car going lowards the accident with its light and
siren on and where were many care stapped
so after tacking to my daughters we decided to
when the accident occurred the mine wan
was following behind me protty class. I had
don't like to be followed close. He did not
don't like to be followed clase. The did not
for quite awhile and just sumed to let me but the pace.
for quite awhile and just seemed to let me
Det the pace.
el colled on
Monday to see if he thought I should tack to
someone or fill out a witness form. The
brought this your over for me to fill out.
Date. Signatur
5ignatur

Witness.

Time:

# **WITNESS STATEMENT**

ooper:	UCR/Case #:
Defendant:	Date of Incident:
Location:	County:
I make the following statement of my own free timplied to induce me to make this statement:	will with no force or threats used against me and no promises made or
Name	Phone:
Home Address	
Business Name:	
Business Address	
Low hold for the south was south should land of the South should be also of the hit the bigun coe co	when the bive and qually south south sold at the read when the to avoid him by going the thirty of the they are they the thrown when they have the comment through the partitle the comment of the partitle the comment of the partitle the comment of the partitle the comment of the partitle the comment of the partitle the comment of the partitle
Date:	Signatur.
Time:	Witness:

WEST TO WORK AT

& STANTON WORLE AT

SLEPT.

GETTING CAN RUTERY

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		<b>ORIG</b>	ΙΝΙΔΙ	
				BODY STYLE
VEHICLE IDENTIFICA	TION NUMBER	YEAR MODEL	MAKE OF VEHICLE	4DR
		1983	BUICK	
			III(t Nomi	
	MEG CAPACITY		LICLINSE NOMBER	
MODEL	IN TONS	3900	CR. Crisic III	
	PREVIOUS OWN			ODOMETER REA
	BHEAIDO2 OMA	ich		EXEM
				FEMARK(S)
	1	. •		
X				
				•
UNLESS OTHERWISE AUTHOR THE NAME OF AMOTHER PERS INFORMATION DRYA CENTRICAT	IZED BY LAW, IT IS A VIOLEON ON A CERTIFICATE OF T	LATION OF STATE D TITLE OR OTHERWIS	E GIVE FALSE	w <sub>in</sub>
NFORMATION DWA CERTIFICAT	E OF TITLE.			
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	<i>"</i>			
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DATE OF LIEN  DATE OF LIEN  T IS HEREBY CERTIFIED DEPARTMENT OF TOPPONE	THAT ACCORDING TO THE PERSON DEPORT WHICH IS SURJE	E RECORDS OF IN MESEIN NAMED	··E IS THE OWNER OF	BY  AUTHORIZED AGENT  DATE  BY  AUTHORIZED AGENT  DATE  AUTHORIZED AGENT

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### A THE PERSON NAMED IN

IONLE	EN VEHICLE IS SOLD, TITLE HOLDER MUST ASSIGN AND FURNISH THIS TITLE, CURRENT LICENSE RE LES TAX AFFIDAVIT TO THE PURCHASER WHO MUST FILE APPLICATION WITH COUNTY TAX ASSESSOR HIN 20 WORKING DAYS TO AVOID SID PENALTY.	CEIPT, AND
<b>&gt;</b>	FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE THE OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMP	RANSFER OF
	The undersigned hereby certifies that the vehicle described in this title is tree and clear of all liens, except as noted herein, and has been transferred to the following printed na	me and address:
ASSIGNMENT OF TITLE	Toernity to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statement	
	I am aware of the above odometer pertification made by the seller/agent.	
	Signature of Buyer/Agent	
ENT	The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted herein, and has been transferred to the following printed ner	ne and address:
SIGNM	I certify to the best of my knowledge that the addonester reading is the actual mileage of the vehicle unless one of the following statement	Z <sub>p</sub> s is checked:
FIRST HEASSIGNMENT - DEALER ONLY	1. The mileage stated is in excess of its mechanical limits.      COOLETEN RADIAL TOTAL COMMETER DISTRIBUTION OF THE PROPERTY OF THE PROP	SCREPANCY.
EAE.	Difference of the Control of the Con	44
IRST -Di	Printed Name (same as signalized)	
ш	i am aware of the above odomities beigg in the seller/agent.	۲
Ę	Signature of BuyerMoons Printed Name (sampas signature)  The undersigned hereby certifies that the valido described in this little is free and clear of all tiens, except as noted herein, and has been transformed to the following printed name.	e and address:
REASSIGNMENT LER ONLY	Name of Purchaser  Cay State  Cay State	Zp
SSIGN	I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements  1. The mileage stated is in excess of its mechanical limits.	l.
REA	COOMETER READING (No.Tembe): 2. The odometer reading is not the actual mileage. WARNING-ODOMETER DIS	CREPANCY.
< 1	Desier's Name No.	
SECOND DE	Agent's Signature  I am aware of the above odometer certification made by the seller/agent.  Printed Name (same as signature)	
SE		ļ
-+	Signature of Buyer/Agent Printed Name (same as signature)	
ENT	The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted herein, and has been transferred to the following printed name.  Name of Purchaser	and address:
GNMENT ONLY	I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements	Ze is checked:
ᇙᄓ	1. The mileage stated is in excess of its mechanical limits.  ODOMETER READING (No Tombs)  1. The mileage stated is in excess of its mechanical limits.  2. The odometer reading is not the actual mileage. WARNING-ODOMETER DISI	CREPANCY
	Cale of Sale Dealer No	
HIRD REAS DEALER	Oealer's Name	
	Agent's Signature  I am aware of the above odometer certification made by the seller/agent.  Printed Name (same as signature)	
	Signature of Buyer/Agent	
LEN	LIENHOLDER TO BE RECORDED AND SHOWN ON NEW TITLE	
= =	1ST LIEN IN FAVOR OF (NAME & ADDRESS)	



   Time	IRoad	For	Dir	Towards
to y on the stay on the n right onto to s stay on the bear left onto to		1 mile  26 miles  29 miles  51 miles  8 miles  30 miles  22 miles  77 miles  1 mile	IN IN IN IN IN IN IN IN IN IN IN IN IN I	

37) 3/L Quickest route from

Time 5 hrs 46 min. Distance 319 miles.

 Ti	+	Road	IFor	IDir Towards	
· ·	IDEPART ITurn left onto  stay on the e stay on the turn right onto  stay on the bear left onto onto stay on the		29 miles  51 miles  8 miles  30 miles	IN IW IW IN IN IW IS IW ISW	,
			-+	- †	

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Licensed to Report Prepared By: Date of Computer Run

#### DETERMINE DRAG FACTOR USING A DRAG SLED

YOU CAN OBTAIN TWO DECELERATION FACTORS WITH THE DRAG SLED. THEY ARE:

- 1 THE STATIC FRICTION OF A SURFACE
- 2 THE DYNMATIC OR SLIDING FRICTION OF A SURFACE

THE STATIC FRICTION SHOULD BE USED IN CONTROLLED BRAKING SUCH AS ABS BRAKING SYSTEMS. THE SLIDING FRICTION SHOULD BE USED IN ALL OTHER CASES WHERE THE VEHICLE IS SLIDING.

WHAT IS THE WEIGHT OF THE DRAG SLED (W = pounds)? 52
WHAT IS THE PULL FORCE TO START SLIDE (PF = pounds)? 39
WHAT IS THE PULL FORCE WHILE SLIDING THE SLED (PF = pounds)? 39

THE STATIC DECELERATION FACTOR IS .75
THE SLIDING DECELERATION FACTOR IS .75

The formulas used for this calculation are:

f static = PULL WEIGHT AT START OF SLIDE / WEIGHT OF SLED f slide = PULL WEIGHT WHILE SLIDING / WEIGHT OF SLED

#### COMMENTS:

SLED PULLED IN SAME DIRECTION AS SKID.

Report Prepared By: Date of Computer Run:

#### NORMAL BRAKING

D = DISTANCE THE VEHICLE SLID WITH BRAKES LOCKED; WHICH IS THE AVERAGE OF THE MARKS.

Note: If you have no proof of brake failure treat the wheel as if it were skidding. With brake failure use 'PERCENTAGE BRAKING'.

F = DECELERATION FACTOR WHICH HAS BEEN OBTAINED FROM A VEHICLE TEST SKID OR DRAG SLED.

WHAT IS THE DECELERATION FACTOR (F)? .75
WHAT IS THE DISTANCE (D = feet)? 97.7

THE SKID SPEED IS 46.88 MILES PER HOUR, AND THE VELOCITY IS 68.72 FEET PER SECOND.

The formulas used for this calculation are:

S = SQUARE ROOT (30 \* D \* f) V = 1.466 \* S

#### COMMENTS:

FOUR WHEEL SKID OF PLY. VAN PRIOP TO IMPACT.

### COMBINING SPEEDS

THIS USES SPEEDS CALCULATED FROM OTHER SECTIONS OF THE MENU.

HOW MANY SPEEDS DO YOU WISH TO COMBINE? 2

FOR SPEED # 1 THE SPEED IS 46 FOR SPEED # 2 THE SPEED IS 50

THE COMBINED SPEED IS 67.94 MILES PER HOUR, AND THE VELOCITY IS 99.6 FEET PER SECOND.

The formulas used for this calculation are:

$$SC = SQUARE ROOT ((S1 * S1) + (S2 * S2) + . . . . + (Sn * Sn))$$
  
 $VC = 1.466 * SC$ 

## COMMENTS:

THE TWO SPEEDS THAT WERE COMBINED WERE FIRST THE PLY VAN SKIDS PRIOR TO IMPACT AND THEN THE SPEED OF THE VAN AT IMPACT FROM CRUSH.

av

1	<del></del>		CONNECTING CASE	LNO			CA	er ut bout	NO	114
	CASE REPO	ORT	UCR ENTRY	' REQUIR	ED:	Yes D	Not	T Inches		
		TOW REPORT	HOLD O	RDER:	YES		NO	ä		
		AUTO THEFT/RECOVERY OFFENSE REPORT	any garage or service stati ed or ordered held by an o	npounded vehicles - on or any appointed o flicer of the Coloradu	ustodish who i	releases any ve				
DATE		THEFT REPORT	of the Colorado state patri shall be punished as prov	of a hone life cour ided in section 18 1-	106, C R S.	16 4 Class 3 mis	demesnar sn	d		
-		PI	1							
со	DES DR-DHIVER; RO=REGISTERE	D OWNER; V=VICTIM; W	=WITNESS; LP=LAS	T PERSON IN	POSSESSI	ION, RP	=REPOR	TING PAHI	5=5	USPECT
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# NITIAL C FENSE REPORT

# and EVIDENCE SUMMARY TO DISTRICT ATTORNEY

	اا حــ	NITIAL ACT	ION			
TATE AND TIME OF OFFENSE:			DATE-THIS F	REPORT		
EPORTING AGENCY		'NVESTIG	ATING OFFIC	EŖ		
DEFENDANT IN CUSTODY?						
E IN CUSTODY, HAS BAIL BEE	N SET?		AMOUN	Τ		
AS DEFENDANT BEEN SERVE	O WITH SUM	IMONS & COMPLAINT?	No			
request that the District Attorney	prepare	SUMMONS & C	OMPLAINT	☐ CR	MINAL INFORM	IATION
ARREST WARRANT (statement	ent of facts	supporting must accomp	any this repor	rt)		
Other action requested from D.A					<del></del>	<del></del>
		DEFENDANT	(S)			
NAME	DOB	ADDRESS	• •		OCCUPATION	Prev. Offend?
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•		OFFENSE (S	5)			
INITIAL CLASSIFICATION		CRS CITATION	L	OCATION C	FOFFENSE	
ehicular Homicide		18-3 <b>-</b> 106(1)(b)				
ehicular Assault (3 count	s)	18-3 <b>-2</b> 05(1)(b)				
Prove vehicle without vali	d drivers	lic. 42-2-101(1)				
perated an uninsured moto	r vehicle	on a public roadwa	42-4-1213	1(2)		
1	PHY	SICAL EVI	DENCE			
DESCRIPTION OF ITEM	VALU			WHEN IN	PRESENT CUST	ODY OF
					•	
SIGNATURE OF OFFICER T	O SIGN CO	UDI AINT				,

OFFENSE REPORT - FACE SHEET (1)

# WITNESS DIGEST OF EVIDENCE

AGE & OCCUPATION

ADDRESS & TELEPHONE BRIEF STATEMENT OF FACTS TO WHICH EACH WITNESS CAN TESTIFY

I investigated an accident on ll miles east involving a 1983 gray buick 4dr that was westbound and crossed the center line and struck an eastbound blue Plymouth Voyger van head-on. The point of impact was 16.3' south of the center line. The graw buick 4dr. was driven by A death resulted from the accident due to injuries sustained from the accident. Killed was 6 year old In addition to the death three members from the same van riding in the van sustained serious body injuries. Those sustaining serious bodily injuries were37 year old l year old and 8 year old A beer bottle was found under the front seat of vehicle and a broken beer bottle was found behind the front seat of the same vehicle. was transported to the for treatment. While was in x-rav a nurse in the emergency room told an investigator with the that she smelled alcohol on she was working on him. A medicar test performed in the emergency room showed that have some alcohol in his blood. The hospital result was 41(mg/dL). I requested two blood tests approximately one hour apart to determine what the alcohol content was at the time of the accident. als stated to trooper that told her that he had drank 2 beers after getting off work at

# MEMORANDUM

DATE:

TO:

FROM:

SUBJECT: MECHANICAL INSPECTION

ON APPROX 1500 HRS, I PREFORMED A MECHANICAL INSPECTION ON A 1994 PLYMOUTH VOYAGER, MILEAGE 9456, AT THE FOLLOWING:

TIRES: ALL FOUR TIRES ON THE VEHICLE WERE IN NEW CONDITION. THE LEFT FRONT TIRE HAD 43PSI, THE RIGHT FRONT TIRE WAS FLAT DUE TO ACCIDENT DAMAGE. THE RIGHT REAR TIRE HAD 45 PSI AND THE LEFT REAR TIRE HAD 43PSI.

ENGINE COMPARTMENT: BECAUSE OF THE AMOUNT OF DAMAGE, THE ONLY THING I COULD CHECK WAS THE STEERING GEAR BOX LINKAGE. THE DAMAGE MADE IT NON ACCESSIBLE TO CHECK THE FLUID LEVELS AND BELTS FOR SERVICEABLY. ALSO THE THROTTLE LINKAGE COULD NOT BE CHECKED.

SUSPENSION: THE REAR LEAF SPRINGS AND SHOCK ABSORBERS WERE INTACT AND OK.

UNDERSIDE: THE EXHAUST SYSTEM WAS INTACT AND OK. THE BRAKE LINES TO THE REAR BRAKES WERE INTACT AND OK. THE VEHICLE TRANSAXLE AND MOTOR MOUNT WAS BROKEN ON THE RIGHT SIDE. THE EMERGENCY BRAKE CABLE WAS INTACT BUT NOT OPERATIONAL DUE TO ACCIDENT DAMAGE.

VEHICLE INTERIOR: BOTH LEFT AND RIGHT SEATBELTS WERE IN A SLACKED POSITION. THE LIGHT SWITCH WAS UNDETERMINED IN WHAT POSITION IT WAS IN DUE TO IT WAS A PUSH BUTTON STYLE. THE ACCELERATOR LINKAGE WAS BENT DUE TO ACCIDENT DAMAGE. THE STEREO WAS IN THE ON POSITION AND THERE WAS A TAPE IN THE TAPE PLAYER. THE CRUISE CONTROL SWITCH WAS UNDETERMINED IN WHAT POSITION IT WAS IN.

I FEEL THERE WAS NO MECHANICAL DEFECTS TO CONTRIBUTE TO THIS ACCIDENT. THERE WERE NO PHOTOGRAPHS TAKEN.

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# MEMORANDUM

DATE:

TO:

FROM:

SUBJECT:

MECHANICAL INSPECTION

ON APPROX 0930 HRS, I PERFORMED A MECHANICAL INSPECTION ON A 1993 BUICK LE SABRE, YARD IN NO RECORDED THE FOLLOWING:

TIRES: ALL FOUR TIRES ON THE VEHICLE WERE IN NEW CONDITION. THE TIRE SIZE: P205/75/R15 GENERAL, (M&S). THE TIRE PRESSURE IN THE RIGHT REAR WAS 27PSI, THE OTHER THREE WERE FLAT. DUE TO ACCIDENT DAMAGE.

ENGINE COMPARTMENT: ALL THE DRIVE BELTS WERE IN SERVICEABLE CONDITION. THE ENGINE OIL LEVEL WAS IN OPERATING RANGE. THE TRANSMISSION OIL LEVEL COULD NOT BE CHECKED DUE TO ACCIDENT DAMAGE. THE ENGINE RADIATOR WAS EMPTY DUE TO ACCIDENT DAMAGE. THE BRAKE MASTER CYLINDER WAS INTACT AND THE FLUID LEVEL WAS IN THE OPERATING RANGE. THE THROTTLE LINKAGE AT THE CARBURETOR WAS INTACT AND OPERATIONAL. BOTH UPPER AND LOWER RADIATOR HOSES WERE INTACT.

BRAKES: THE REAR BRAKE SHOES WERE BONDED AND IN SERVICEABLE CONDITION. THE FRONT BRAKE PADS WERE IN SERVICEABLE CONDITION AND LOOKED NEW. THE REAR BRAKE DRUMS INTACT AND OK. THE FRONT CALIPERS AND ROTORS INTACT AND OK. THE BRAKE LINES TO THE FRONT CALIPERS WERE INTACT AND OK. THE BRAKE LINES TO THE REAR CYLINDERS WERE INTACT AND OK.

STEERING: THE STEERING WHEEL INSIDE THE VEHICLE WAS BENT DUE TO ACCIDENT DAMAGE. THE RIGHT TIE ROD END WAS BROKEN DUE TO ACCIDENT DAMAGE. THE IDLE ARM WAS INTACT BUT WAS NOT MOVEABLE DUE TO ACCIDENT DAMAGE. LINKAGE TO THE STEERING GEAR BOX WAS INTACT.

SUSPENSION: THE RIGHT REAR SPRING WAS BROKEN FROM THE MOUNT DUE TO AXLE DAMAGE. THE REAR SHOCKS WERE NEW AND ALSO BROKEN FROM MOUNTS. BOTH FRONT LEFT AND RIGHT BALL JOINTS INTACT.

UNDERSIDE: THE EXHAUST WAS INTACT AND BROKEN FROM THE MOUNTS. THE RIGHT FRONT MOTOR MOUNT WAS BROKEN. THE TRANSMISSION MOUNT WAS ALSO BROKEN AND THE TRANSMISSION WAS PUSHED BACK DUE TO ACCIDENT DAMAGE. THE REAR AXLE HOUSING WAS BROKEN ON THE RIGHT SIDE AND THE AXLE REMOVED DUE TO ACCIDENT DAMAGE. THE EMERGENCY BRAKE CABLE WAS INTACT AND OPERATIONAL.

VEHICLE INTERIOR: ODOMETER SHOWED: 55048 MILES: THE LIGHT SWITCH WAS IN THE OFF POSITION. THE LEFT SEATBELT WAS CUT AND THE RIGHT SEATBELT IN THE STOWED POSITION. THE ACCELERATOR LINKAGE WAS BENT DUE TO ACCIDENT DAMAGE. THE BRAKE PEDAL LINKAGE WAS INTACT. THE CRUISE CONTROL SWITCH WAS IN THE ON POSITION.

THERE WERE NO PICTURE TAKEN DURING THE INSPECTION, AND I FEEL THERE WERE NO MECHANICAL DEFECTS TO CONTRIBUTE TO THIS ACCIDENT.

	_			DATE	ACCIDENT	LOCATION	ACCIDENT D	TE EXAM		ON EXAM T	IME/START/F
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# CASE SUMMARY

Case Number: _		-						
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18-3-106(1)(b)		,						T
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18-3-205(1)(b)								<del> </del>
42-2-101(1) 42-4-1213(2)	Operated	l an unins	out valid di ured motor v VICTIM/S	rivers li vehicle o	cense. 2T l n a public 1	roadway M		<u> </u>
Name		D.O.B.			Address		Pho	ne
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Г		CONNECTING CASE NO					CASE	CASE REPORT NO			
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0	INCIDENT REPORT	W REPORT ITO THEFT/RECOVERY FENSE REPORT	24-33.5 213 any gerage or ed or ordered	DORDI  Note to be a seried of the series of	I vehicles - pi appointed cu le Colorado s na lide court	YES snally. Any own slodian who re late patrol will order commits oe, C.R.S.	ner, eperator ( Neases any ve Nout a release	trom en eficer	f		ılar homicide ılar assault
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z	ARREST  ABANDONED HAZARD		LIST OF PROP	FRTY	one b	eer b	ottle	und	er :	seat, one bro	
INFORMATION	CONDITION OF VEHICLE:	beer bottle behind front seat, misc. clothes									
A W	1-MINOR 2-MODERATE 3-EXTR	pair boots, one pair pants, one shirt, three									
ı N	3 14 15 16 17 18							shire, chice			
1 "	2 17 110	tapes, one map on front seat.									
VEHICLE		VALUE OF RECOVERED STEAL VALUE OF PRO						VALUE OF PROPERTY			
>	16 15 14 13 12	S OWNER NOTIFIED						S DATE/TIME			
	VA 28	MAIL PERSON OTHER								PHONE	
	TOW COMPANY NAME							DATE/TIME	E/TIME RELEASED BY		
	SIGNATURE OF TOW OPERATOR	VE	HICLE HEI	ASEU 10				JATE/TIME			necenses e
	STATUTE NUMBER			CHARGE					YES	NO	SUMMONS/WARE NUMBER
S	18-3-106(1)(b)	Vehicular hom:	icide 3F							Х	Direct filin
CHARGE	18-3-205(1)(b)		ault (3 counts) 5F							Х	Direct filin
CHA				(5 codiles)				леа ЭТ	,	X	Direct Filin
	42-2-101(1)	Drove vehicle without valid drivers license						1	X		
-	42-4-1213(2)	ninsured motor vehicle on a public X Direct						Direct filin			
	1 N. N. X	Ro <b>adw</b> ay						M			
	• • •										
\											
NARRATIVE	um · ·										
RRA											
Ž	· · · · · · · · · · · · · · · · · · ·	•									
i	I AFFIRM THAT THIS INFORMATION IS C	ORRECT AND TRUE						ROA	DSIDE	AUTH	ORIZATION
								1 aut	horize a	and acc	cept responsibility for the
-	SIGNATURE OF REPORTING PARTY				PE VIEW	ED BY (IN	TIALS)	capti	oned vo	phicle t that thi	lo remain where now par- is vehicle MUST be move
								- 1			be towed at the owner.
					i			1			# * **

2 OF 4

#### DAMAGE RESULTS: PLY \*\*\*\*\*\*

DATE: PROJECT: SPEED CHANGE FROM CRUSH CASE: PROBLEM TYPE: WEHICLE DESCRIPTION: van VEHICLE DATA \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* 4 (INTERMEDIATE) STIFFNESS CATEGORY: 356 lb/in +/- 10% \*STIFFNESS COEFFICIENTS: 34 lb/in^2 +/- 10% \* \* WHEELBASE (in): COLLISION SURFACE: 1 (FRONT) 81.0 \* \* XF (in): 111.9 \* 3300 \* XR (in): WEIGHT (lb): 72.0 \* RADIUS OF GYRATION (in^2): 3741 \* YW (in): \* CRUSH DIMENSIONS (inches) \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* TOTAL CRUSH WIDTH, L: 72.0 D: 0.0 \* CRUSH OFFSET, 9.0 L1 =0.0 DIRECT PROFILE SPECIFIED? N C1 =18.0 L2 =14.4 C2 =L3 = 28.8 C3 =34.0 42.0 L4 =43.2 C4 =L5 =C5 =52.0 57.6 FORCE LOCATION: L6 = 72.0 C6 =54.0 TOTAL CRUSH CENTROID 60.2 **X**: 8.4 \* VEHICLE DAMAGE RESULTS \* +/-VALUE ERROR \* +/-0 10 PDOF (degrees) \* 46.0 +/-EOUIVALENT BARRIER SPEED (mph) +/-10.5 8.4 MOMENT OFFSET (in) +/-112600 9100 FORCE MAGNITUDE (1b) +/-2851000 205000 COLLISION ENERGY (in-lb) 0.98 +/-0.05 MASS RATIO 1.00 +/-0.00 FORCE MAGNIFICATION FACTOR \* CRUSH INTERACTION WITH BUICK \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* \* +/-2.9 50.5 SPEED CHANGE TOWARDS FORCE (mph) 126400 +/-17300 AVERAGE FORCE MAGNITUDE (1b) +/-2.00 2.50 ANGULAR SPEED CHANGE (r/s) LINEAR IMPULSE (1b-s) 7590 +/-430 +/-100.9 7.0 RELATIVE APPROACH SPEED (mph) \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

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PROJECT:
                                         DATE:
PROBLEM TYPE: SPEED CHANGE FROM CRUSH
                                         CASE:
VEHICLE DESCRIPTION:
                      VEHICLE DATA
   STIFFNESS CATEGORY:
                     5 (FULL SIZE)
   STIFFNESS COEFFICIENTS:
                        325 \text{ lb/in +/-} 10\%
                         37 lb/in^2 +/- 10%
********************************
   COLLISION SURFACE:
                     1 (FRONT)
                                * WHEELBASE (in):
                                                115.0 *
                                * XF (in):
                                                 98.1 *
  WEIGHT (lb):
                            3631 * XR (in):
                                                119.9 *
  RADIUS OF GYRATION (in^2): 4040 * YW (in):
*************************
                 CRUSH DIMENSIONS (inches)
**********************************
  TOTAL CRUSH WIDTH,
                        76.0
                    L:
  CRUSH OFFSET,
                         0.0
    DIRECT PROFILE SPECIFIED? N
                                C1 =
                                     22.0
                                           L1 =
                                                 0.0
                                C2 =
                                     19.0
                                           L2 =
                                                15.2
                                C3 =
                                     30.0
                                           L3 =
                                                30.4
                                C4 =
                                     40.0
                                           L4 =
                                                45.6
  FORCE LOCATION:
                                C5 =
                                     57.0
                                           L5 =
                                                60.8
       TOTAL CRUSH CENTROID
                                C6 =
                                     67.0
                                           L6 =
                                                76.0
                        75.8
                    X:
                    Y:
                         8.9
                 VEHICLE DAMAGE RESULTS
************************************
                                  VALUE
                                         +/-
                                              ERROR
*************************
  PDOF (degrees)
                                     20
                                              10
***********************************
  EQUIVALENT BARRIER SPEED (mph) *
                                   49.8
                                         +/-
                                              4.8
  MOMENT OFFSET (in)
                                  -17.6
                                         +/-
                                              13.0
  FORCE MAGNITUDE (1b)
                                 140200
                                         +/-
                                              14700
  COLLISION ENERGY (in-1b)
                                 3890000
                                         +/-
                                              630000
  MASS RATIO
                                         +/-
                                   0.93
                                              0.10
  FORCE MAGNIFICATION FACTOR
                                   1.13
                                         +/-
                                              0.14
  **********
               CRUSH INTERACTION WITH PLY
************************
  SPEED CHANGE TOWARDS FORCE (mph)
                                          +/-
                                    45.9
                                               2.6
  AVERAGE FORCE MAGNITUDE (1b)
                                          +/-
                                  126400
                                               17300
  ANGULAR SPEED CHANGE (r/s)
                               *
                                   -3.52
                                          +/-
                                               2.60
  LINEAR IMPULSE (lb-s)
                                    7590
                                          +/-
                                               430
  RELATIVE APPROACH SPEED (mph)
                            *
                                   100.9
                                          +/-
                                               7.0
```

# WARNING MESSAGES \*\*\*\*\*\*\*\*\*\*\*

(

4 OF 4

	•
PROJECT:	DATE:
PROBLEM TYPE: SPEED CHANGE FROM CRUSH	CASE:
******************* VEHICLE ONE: PLY	********
*	*
*	*
*	*
* There were no program orrors or warnin	*
* There were no program errors or warnin *	gs flagged. *
*	*
*	*
*	*
*	*
*	*
************	********
*************** VEHICLE TWO: BUICK	*******
*	*
*	*
*	* *
*	*
*	*
* There were no program errors or warning	
*	*
*	*
*	*
*	*
*	*
*************	********
************* CASE WARNINGS:	***********
*	*
*	*
* *	*
*	*
*	*
* There were no program errors or warning	gs flagged. *
*	*

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			CONNECTING CASE NO	CASE UN	DE YOU NET						
)		CASE REPORT	UCR ENTRY REQUIRED: Yes	No	NO   REASON HEED radditional into in narrative)						
		☐ INCIDENT REPORT ☐ TOW REPORT ☐ CUSTODY REPORT ☐ AUTO THEFT/RECOVERY ☐ OFFENSE REPORT ☐ OFFENSE REPORT	HOLD ORDER: YES  24-33 3-213 Release of impounded vehicles - penalty. Any owner, oper  Any sweep or service station or any appointed custodian who referses a  ed or ordered hold by an officer of the Colorado state partic	NO Signature of the second of	EASON MEED (additional into in narrative)						
1	.TAC.	E	LOCATION								
	CC	Anna de la companya d	VITNESS: LP=LAST PERSON IN POSSESSION:	RP=REPORTING F	PARTY S=SUSPECT						
		CODE		·	SOCIAL SECURITY NO						
	ECT 1	ADDRES									
1	BJE	DRIVER'ST			SIRTH (CITY, STATE)						
.	S	EMPLOYER NAME EMPLOYER ADDR	TA W MI Ja	06-3 75	HOME TELEPHONE						
		EMPLOTEN ADDR	OCCU	PATION	BUSINESS TELEPHONE						
	7	·		В.	SOCIAL SECURITY NO						
	ECT				- STATE ZIP CODE						
	SUBJ	DRIVER'S LICENSE NUMBER AND TYPE	STATE RACE SEX WGT.	HGT. HAIR	EYES HOME TELEPHONE						
.	Ω	EMPLOYER NAME EMPLOYER ADDRE	SS Occur	PATION	BUSINESS TELEPHONE						
		LICENSE DI ATERIVE									
'		COLOR (TOP/BUTTOP)	MAKE,	12-1	TYPE OR EGOY STYLE						
1		REASON TOWED:	VIN								
		CIDENT OTHER:	INVENTORY OF VEHICLE	TRUNK	EXAMINED TYES TO NO						
1	z O	☐ ARREST ☐ ABANDONED HAZARD									
	AT	CONDITION OF VEHICLE:	LIST OF PROPERTY PENTA	LIST OF PROPERTY / PENTA) CAMERA							
1	0 8 8	1-MINOR 2-MODERATE 3-EXTREME	GAME Bay, 1 B	CLOTHING, IBLUE BAB WITH KIDS TOY							
	LIST OF PROPERTY   PENTA) CAMERA  CONDITION OF VEHICLE:  1-MINOR 2-MODERATE 3-EXTREME  LIST OF PROPERTY   PENTA) CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PENTAN CAMERA  LIST OF PROPERTY   PE										
	3	3 3 13 10 " I Bue SUT ONE MEE COTHING,									
	E	3 3 3	I BLACK BAG MEC	Cordin	1/7						
	>	3 13 14 13 12 20 Undercorriage	S		VALUE OF PROPERTY						
		·	OWNER NOTIFIED  MAIL   PERSON   OTHER		DATE/TIME						
	1	TOW.COMPANY NAME			PHONE						
		VEHIC	SLE HELEASED 10	DATE/TIME	RELEASED BY						
	7	STATUTE NUMBER		I WAS	RANT SUMMONS AVADRAMA						
1.	,		CHARGE .	YES	NO SUMMONS WARRANT						
IΙι	4 (			1							
30 4 77	3										
,	,										
Ĺ			***************************************								
		3 Rue Diesen Down M	Con Contract								
	1	3 Blue DUFFR BASS M.	& CLOTHING, I Flow	RAL BA	& wITH						
		PUMO-HINE,	INCO RAS WORTH		Promoso						
×		G POLERING BOOK, J BAPER BAS WITH TOUS, I PAPER BAG WITH FOOD, #16 CASH, I COOLE WITH DRINGS (DOD) MISC CLOTHING & TOUS ALL DROPPERY GIVEN. TO									
NARRATIVE		WITH FOOD, \$10 CASH	1 Roice WITH DRI	ant in							
NAR		CLOTHING of TOUS ALL DE	MOON GUELL TO	مرزع ديم	DI MIX						
	L	· 115- pa	9766. 73								
1	1.	AFFIRM THAT THIS INFORMATION IS CORRECT AND TRUE		ROADSIDE	AUTHORIZATION						
	Sı	GNATURE OF REPORTING PARTY									
			REVIEWED BY (INITIALS)	aptioned ve	nd accept responsibility for the above higher for emain where now parked, and half this vehicle MUST for moved within						
				.'4 hours or i	I may be towed at the owner's expense.						
		WHERE-CASE FILE GREEN-DATA ENTRY: FILE Y	ELLCY DAIL PROPERT MANAGEMENT	OPERATOR							
i SP	30 (I	REV 9/90) VEHICLE OWNER/O	DEDUCED THE CONTRACTOR OF CONTRACTOR	OF SERVICE OWN	ER GELEZIOE						